| Fill in this information to identify your case: | | |
|---|--|------------------------------------|
| United States Bankruptcy Court for the : | | |
| NORTHERN District of ILLINOIS (State) | | |
| Case Number (If known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | Identify Yourself | | |
|----|--|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture | Keith First name | Deborah First name |
| | identification (for example, your driver's license or | Carter | Ann |
| | passport). | Middle name | Middle name |
| | Bring your picture | Broadney | Broadney |
| | identification to your meeting with the trustee. | Last name | Last name |
| | | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last 8 | First name | First name |
| | years | | |
| | Include your married or maiden names. | Middle name | Middle name |
| | | Last name | Last name |
| | | | |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Middle Harrie | wildle name |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social Security | XXX - XX - <u>8666</u> | XXX - XX - <u>2723</u> |
| | number or federal Individual Taxpayer | OR | OR |
| | Identification number | 9 xx - xx | 9 xx - xx |

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Document Broadney Keith Carter Debtor 1 Case Number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | Business name Business name EIN EIN | Business name Business name EIN EIN |
| 5. | Where you live | 4135 S. Vincennes Ave | If Debtor 2 lives at a different address: |
| | | Number Street Unit 2S | Number Street |
| | | Chicago IL 60653 City State ZIP Code COOK County | City State ZIP Code County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address. |
| | | Number Street | Number Street |
| | | P.O. Box City State ZIP Code | P.O. Box City State ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | have another reason. Explain. (See 28 U.S.C. § 1408 | I have another reason. Explain. (See 28 U.S.C. § 1408 |

Debtor 1 Keith Carter Document Broadney Page 3 of 67

Case Number (if known)

| Pa | Tell the Court About Your | Bankruptcy (| Sase | | | |
|-----|---|---|--|--|---|--|
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | | er 11 er 12 | | | Required by 11 U.S.C. § 342(b) for Individuals page 1 and check the appropriate box. |
| 8. | How you will pay the fee | local of yours subm with a linear Application I required By law less the pay the submitted by the submitted | court for more de elf, you may pay itting your payme pre-printed add I to pay the fee eation for Individ- est that my fee I v, a judge may, nan 150% of the lee fee in installm | etails about how you with cash, cashier ent on your behalf, lress. in installments. If you als to Pay The Fill the waived (You may but is not required to official poverty line lents). If you choose | ou may r's chec your a you che ling Fee ay reque to, wait e that a se this c | Please check with the clerk's office in your pay. Typically, if you are paying the fee ck, or money order. If your attorney is attorney may pay with a credit card or check close this option, sign and attach the e in Installments (Official Form 103A). The est this option only if you are filling for Chapter 7. It is your fee, and may do so only if your income is applies to your family size and you are unable to option, you must fill out the Application to Have the sell and file it with your petition. |
| 9. | Have you filed for bankruptcy within the last 8 years? | ■ No □ Yes. | District None District None | v | When | Case Number MM / DD / YYYY Case Number MM / DD / YYYYY Case Number MM / DD / YYYYY |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business parter, or by affiliate? | ■ No | District | v | Vhen | Relationship to you Case Number, if known MM / DD / YYYYY Relationship to you Case Number, if known MM / DD / YYYY |
| 11. | Do you rent your residence? | □ No. ■ Yes. | residence? No. Go to lii Yes. Fill out | ne 12. | | ent against you and do you want to stay in your Eviction Judgment Against You (Form 101A) and file it with |

Case 16-29661 Doc 1 Filed 09/17/16 Entered 09/17/16 09:41:50 Desc Main Document Page 4 of 67 Keith Carter Case Number (if known) Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. Go to Part 4. of any full- or part-time Yes. Name and location of business business? A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnerhsip, or Street Number LLC. If you have more than one sole proprietorship, use a separate sheed and attach it to this petition. City Zip Code Check the appropriate box to describe your business: ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A)) ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) ■ None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent Chapter 11 of the balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these **Bankruptcy Code and** documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. For a definition of small business debtor, see No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in 11 U.S.C. § 101(51D). the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention No. 14. Do you own or have any property that poses or is Yes alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock

that must be fed, or a building that needs urgent repairs?

| . What is the hazard? | | | | |
|---------------------------|-------------|---------------|---------------|----------|
| If immediate attention is | needed, why | is it needed? | | |
| Where is the property? | Number | Street | | |
| | City | | State | ZIP Code |

Debtor 1

Keith Carter Document

Page 5 of 67 Case Number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing | about |
|---|-------|
| credit counseling because of: | |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about |
|---|
| credit counseling because of: |

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

> to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Keith Carter Document Broadney Page 6 of 67

Case Number (if known)

| Pa | Answer These Questions | for Reporting Purposes | | |
|-----|---|---|--|--|
| 16. | What kind of debts do you have? | | consumer debts? Consumer debts are def primarily for a personal, family, or household p | |
| | | | business debts? Business debts are debts | |
| | | No. Go to line 16c. Yes. Go to line 17. | · | |
| | | 16c. State the type of debts you o | owe that are not consumer debts or business d | ebts. |
| 7. | Are you filing under Chapter 7? | No. I am not filing under Cl | napter 7. Go to line 18. | <u> </u> |
| | Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | | er 7. Do you estimate that after any exempt press are paid that funds will be available to distrib | |
| 8. | How many creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-199 □ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 |
| 9. | How much do you estimate your assets to be worth? | ■ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 0. | How much do you estimate your liabilities to be? | □ \$0-\$50,000 ■ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Pa | Tt 7: Sign Below | | | |
| ∙or | you | correct. If I have chosen to file under Chap | I declare under penalty of perjury that the infor oter 7, I am aware that I may proceed, if eligible inderstand the relief available under each chap | e, under Chapter 7, 11,12, or 13 |
| | | | did not pay or agree to pay someone who is n d read the notice required by 11 U.S.C. § 342(| · |
| | | I request relief in accordance with | the chapter of title 11, United States Code, spe | ecified in this petition. |
| | | - | ment, concealing property, or obtaining money in fines up to \$250,000, or imprisonment for up d 3571. | |
| | | /s/ Keith Carter Broad Signature of Debtor 1 | | eborah Ann Broadney ture of Debtor 2 |
| | | Executed on09/16/2016 | | ted on09/16/2016 MM / DD / YYYY |

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| Debtor 1 | Keith | Carter | Broadney | Case Number (if known) |
|----------|------------|-------------|-----------|------------------------|
| | First Name | Middle Name | Last Name | |

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ Lisa LaShawn Haley | Date | Date: | 09/16/2016 |
|----------------------------------|----------|---------|------------|
| Signature of Attorney for Debtor | | MM / DE |) / YYYY |
| Lisa LaShawn Haley | | | |
| Printed name | | | |
| Geraci Law L.L.C. | | | |
| Firm name | | | |
| 55 E. Monroe St., #3400 | | | |
| Number Street | | | |
| vullibel Street | | | |
| Number Street | | | |
| Chicago | IL | 60603 | 3 |
| Chicago | IL State | | 3 Code |
| Chicago | State | ZIP | Code |
| Chicago | State | ZIP | |
| Chicago | State | ZIP | Code |

| Fill in this information to identify your case: | | | | | |
|---|--------------------------|---------------------------------|-------------------------------|--|--|
| Debtor 1 | Keith | Carter | Broadney | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | Deborah | Ann | Broadney | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the | ne : <u>NORTHERN</u> District o | f_ <u>ILLINOIS</u> (State) | | |
| Case Number | | | | | |

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Summarize Your Assets | |
|--|--------------------------------------|
| | Your assets Value of what you own |
| Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$0 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$ 16,550 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$ 16,550 |
| Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$16,060 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$6,150 \$30,232 |
| | |
| | |
| Part 3: Summarize Your Liabilities | |
| Part 3: Summarize Your Liabilities 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$4,071.66 |

Case 16-29661 Doc 1 Filed 09/17/16 Entered 09/17/16 09:41:50 Desc Main Page 9 of 67 Document Debtor 1 Keith Carter Case Number (if known) _ First Name Middle Name Last Name **EntriesDescription AssetsAmount LiabilitiesAmount Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$6,661.90 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 of Schedule E/F, copy the following: \$ 0.00 9a. Domestic support obligations (Copy line 6a.) \$ 6,150.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) $_{0.00}$ 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)

\$ 0.00

\$ 0.00

\$ 0.00

\$<u>6,150.</u>00

9d. Student loans. (Copy line 6f.)

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9e. Obligations arising out of a separation agreement or divorce that you did not report as

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

| | Caco 16 | 3 20661 Doc 1 | Filod 00/17/16 | Entered 09/17/16 0 | 9:41:50 Des | sc Main |
|---|---|--|--|--|--|---|
| Fill in this in | nformation to ider | ntify your case and this fili | | 0 of 67 | | |
| Debtor 1 | Keith | Carter | Broadney | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Deborah | Ann | Broadney | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court fo | or the : <u>NORTHERN</u> Distri | ct of <u>ILLINOIS</u> (State) | | | _ |
| Case Number | r | | (State) | | l | Check if this is an |
| (If known) | | _ | | | | amended filing |
| Official F | orm 106A | <u>/B</u> | | | | |
| Schedul | e A/B: Pro | operty | | | | 12/15 |
| ategory where esponsible for ages, write yo | you think it fits I supplying correct our name and case | best. Be as complete and a ct information. If more spa e number (if known). Ansv | accurate as possible. If two m ice is needed, attach a separa | fits in more than one category, I arried people are filing together, te sheet to this form. On the top | both are equally | |
| 01. Do you ov No. Yes. | vn or have any le | gal or equitable interest in | any residence, building, land | , or similar property? | | |
| | - | - | , , , , , , , , , , , , , , , , , , , | | > | \$0.00 |
| Part 2: | Describe Your Veh | nicles | | | | |
| O3. Cars, vans No. Yes. | | Chevrolet Malibu 2013 | • | у | Do not deduct secured the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> aims Secured by Property Current value of the portion you own? |
| 04. Watercraft Examples: No. | - | <u>-</u> | Check if this is comministructions) creational vehicles, other veh vessels, snowmobiles, motorcycle | unity property (see | \$ 13,950. | 00 \$ 13,950.00 |
| Yes. 5. Add the do l | | ortion you own for all of y | our entries fro Part 2, includir | ng any entries for pages | | 0.40.050.00 |
| | | | | > | | \$ 13,950.00 |
| Part 3: | Describe Your Per | sonal and Household Items | | | | |
| Do you own o | r have any legal o | or equitable interest in any | of the following items? | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| | d goods and furn Major appliances, fu Describe | urniture, linens, china, kitchenw | | | | |
| | | Furniture, linens, small appliar | nces, table & chairs, bedroom set | | \$1,000 | ¢ 1,000,00 |

Keith

Case 16-29661

Doc 1

Filed 09/17/16
Broadney
Document
Last Name

Desc Main

First Name Middle Name

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| | S | | |
|--|--|---|---|
| | | dios; audio, video, stereo, and digital equipment; computers, printers, scanners; music | |
| | electronic devices | including cell phones, cameras, media players, games | |
| ∐No. | | | |
| Yes. | Describe | | |
| | | Flat screen TV, computer, printer, music collection, cell phone \$500 | |
| | | | \$ <u>500.0</u> 0 |
| 08. Collectible | | | |
| | | ines; paintings, prints, or other artwork; books, pictures, or other art objects; collections; other collections, memorabilia, collectibles | |
| No. | i, or baseball card | concentris, other concentris, memorabilia, concentrics | |
| I = | Danasika | | |
| ∐Yes. | Describe | | \$ 0.00 |
| 00 Fauriament | · for one who and | habbia | \$0.00 |
| | t for sports and | nic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes | |
| | | nusical instruments | |
| No. | | | |
| Yes. | Describe | | |
| | Describe | | \$ 0.00 |
| 10. Firearms | | | <u> </u> |
| | Pistols, rifles, shot | guns, ammunition, and related equipment | |
| No. | | | |
| Yes. | Describe | | |
| | Describe | | s 0.00 |
| 11. Clothes | | | · · |
| | Everyday clothes, | furs, leather coats, designer wear, shoes, accessories | |
| ∏No. | | | |
| Yes. | Describe | | |
| 100. | Describe | Everyday clothes, 1 old fur, designer wear, shoes, accessories \$500 | |
| | | | \$ 500.00 |
| 12. Jewelry | | | |
| Examples: | Everyday jewelry, | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | |
| malal attend | | | |
| gold, silver | | | |
| Mo. | | | |
| | Describe | | l |
| No. | Describe | Everyday jewelry, costume jewelry, engagement ring, wedding rings, \$500 | |
| No. Yes. | | Everyday jewelry, costume jewelry, engagement ring, wedding rings, \$500 | \$ <u>500.0</u> 0 |
| No. Yes. | animals | | \$ <u>500.0</u> 0 |
| No. Yes. 13. Non-farm a Examples: | | | \$ <u>500.0</u> 0 |
| No. Yes. | animals | | \$ <u>500.0</u> 0 |
| No. Yes. 13. Non-farm a Examples: | animals | norses | \$ <u>500.0</u> 0 |
| No. Yes. 13. Non-farm a Examples: No. | animals Dogs, cats, birds, | | |
| No. Yes. 13. Non-farm a Examples: No. Yes. | animals Dogs, cats, birds, Describe | norses \$0 | \$ <u>500.0</u> 0 \$ <u>0.0</u> 0 |
| No. Yes. 13. Non-farm a Examples: No. Yes. | animals Dogs, cats, birds, Describe | norses | |
| No. Yes. 13. Non-farm a Examples: No. Yes. | animals Dogs, cats, birds, l Describe personal and he | norses \$0 | |
| No. Yes. 13. Non-farm a Examples: No. Yes. | animals Dogs, cats, birds, Describe | norses \$0 | \$ <u>0.0</u> 0 |
| No. Yes. 13. Non-farm a Examples: No. Yes. | animals Dogs, cats, birds, l Describe personal and he | norses \$0 | |
| No. Yes. 13. Non-farm a Examples: No. Yes. | animals Dogs, cats, birds, l Describe personal and he Describe | norses \$0 | \$0.00 \$0 |
| No. Yes. 13. Non-farm a Examples: No. Yes. 14. Any other No. Yes. | animals Dogs, cats, birds, l Describe personal and ho Describe | 1 Dog \$0 Dusehold items you did not already list, including any health aids you did not list | \$0.00 |
| No. Yes. 13. Non-farm a Examples: No. Yes. 14. Any other No. Yes. 15. Add the do for Part 3. | animals Dogs, cats, birds, l Describe personal and ho Describe Ilar value of all Write that numb | 1 Dog \$0 Dusehold items you did not already list, including any health aids you did not list of your entries from Part 3, including any entries for pages you have attached per here | \$0.00 \$0 |
| No. Yes. 13. Non-farm a Examples: No. Yes. 14. Any other No. Yes. 15. Add the do for Part 3. | animals Dogs, cats, birds, l Describe personal and ho Describe | 1 Dog \$0 Dusehold items you did not already list, including any health aids you did not list of your entries from Part 3, including any entries for pages you have attached per here | \$0.00 \$0 |
| No. Yes. 13. Non-farm a Examples: No. Yes. 14. Any other No. Yes. 15. Add the do for Part 3. V | animals Dogs, cats, birds, l Describe personal and ho Describe Illar value of all Write that numb | 1 Dog \$0 Dusehold items you did not already list, including any health aids you did not list of your entries from Part 3, including any entries for pages you have attached per here | \$\$\$ |
| No. Yes. 13. Non-farm a Examples: No. Yes. 14. Any other No. Yes. 15. Add the do for Part 3. V | animals Dogs, cats, birds, l Describe personal and ho Describe Illar value of all Write that numb | 1 Dog \$0 Dusehold items you did not already list, including any health aids you did not list of your entries from Part 3, including any entries for pages you have attached per here | \$ |
| No. Yes. 13. Non-farm a Examples: No. Yes. 14. Any other No. Yes. 15. Add the do for Part 3. V | animals Dogs, cats, birds, l Describe personal and ho Describe Illar value of all Write that numb | 1 Dog \$0 Dusehold items you did not already list, including any health aids you did not list of your entries from Part 3, including any entries for pages you have attached per here | \$ 0.00 \$ 0.00 \$2,500.00 Current value of the portion you own? |
| No. Yes. 13. Non-farm a Examples: No. Yes. 14. Any other No. Yes. 15. Add the do for Part 3. V | animals Dogs, cats, birds, l Describe personal and ho Describe Illar value of all Write that numb | 1 Dog \$0 Dusehold items you did not already list, including any health aids you did not list of your entries from Part 3, including any entries for pages you have attached per here | \$ |
| No. Yes. 13. Non-farm a Examples: No. Yes. 14. Any other No. Yes. 15. Add the do for Part 3. No. | animals Dogs, cats, birds, l Describe personal and ho Describe Illar value of all Write that numb | 1 Dog \$0 Dusehold items you did not already list, including any health aids you did not list of your entries from Part 3, including any entries for pages you have attached per here | \$ 0.00 \$ 0.00 \$2,500.00 Current value of the portion you own? Do not deduct secured claims |
| No. Yes. 13. Non-farm a Examples: No. Yes. 14. Any other No. Yes. 15. Add the do for Part 3. V | personal and he Describe Describe Describe and he Describe fall Write that numb Describe Your Fire have any legal | 1 Dog \$0 Dusehold items you did not already list, including any health aids you did not list of your entries from Part 3, including any entries for pages you have attached per here | \$ 0.00 \$ 2,500.00 Current value of the portion you own? Do not deduct secured claims |
| No. Yes. 13. Non-farm a Examples: No. Yes. 14. Any other No. Yes. 15. Add the do for Part 3. V | personal and he Describe Describe Describe and he Describe fall Write that numb Describe Your Fire have any legal | Doug \$0 Dougehold items you did not already list, including any health aids you did not list of your entries from Part 3, including any entries for pages you have attached her here | \$ 0.00 \$ 2,500.00 Current value of the portion you own? Do not deduct secured claims |
| No. Yes. 13. Non-farm a Examples: No. Yes. 14. Any other No. Yes. 15. Add the do for Part 3. No. Port 4: Do you own or 16. Cash Examples: No. | animals Dogs, cats, birds, i Describe personal and he Describe Illar value of all Write that numb Describe Your Fir have any legal | Doug \$0 Dougehold items you did not already list, including any health aids you did not list of your entries from Part 3, including any entries for pages you have attached her here | \$ 0.00 \$ 2,500.00 Current value of the portion you own? Do not deduct secured claims |
| No. Yes. 13. Non-farm a Examples: No. Yes. 14. Any other No. Yes. 15. Add the do for Part 3. No. Part 4: Do you own or | personal and he Describe Describe Describe and he Describe fall Write that numb Describe Your Fire have any legal | Doug \$0 Dougehold items you did not already list, including any health aids you did not list of your entries from Part 3, including any entries for pages you have attached her here | \$ 0.00 \$ 2,500.00 Current value of the portion you own? Do not deduct secured claims |

Keith

Case 16-29661

Doc 1

Desc Main

First Name Middle Name Filed 09/17/16

Broadney
Document
Last Name

Entered 09/17/16 09:41:50 Page 12 of 67 umber (if known)

| 17. | Deposits of | of money | | | | |
|-----|--------------|----------------------|--------------------------------------|--|---------------|--------------|
| | | | | ificates of deposit; shares in credit unions, brokerage houses, | | |
| | _ | imilar institutions. | If you have multiple accounts with | n the same institution, list each. | | |
| | No. | | | | | |
| | Yes. | Describe | Account Type: | Institution name: | | |
| | _ | | Checking Account | Chase Checking | \$ | 100.00 |
| | | | | | | 100.00 |
| 18. | Bonds. mi | itual funds, or r | oublicly traded stocks | | <u>*</u> | |
| | | - | tment accounts with brokerage fi | rms, money market accounts | | |
| | No. | _ 3 | account with brokerage III | , | | |
| | = | D | Institution or issuer norse: | | | |
| | Yes. | Describe | Institution or issuer name: | | _ | |
| | | | | | \$ | <u>0.0</u> 0 |
| 19. | Non-public | cly traded stock | and interests in incorporat | ed and unincorporated businesses, including an interest in | | |
| | No. | | | | | |
| | Yes. | Describe | Name of Entity and Percent | of Ownership: | | |
| | | | | | \$ | 0.00 |
| 20. | Governme | nt and corporat | e bonds and other negotiab | le and non-negotiable instruments | | |
| | | = | - | cks, promissory notes, and money orders. | | |
| | - | | | omeone by signing or delivering them. | | |
| | No. | | | | | |
| | Yes. | Describe | Issuer name: | | | |
| | □ . 55. | 20001100 | | | \$ | 0.00 |
| 21 | Retiremen | t or pension ac | counts | | <u>*</u> | |
| -1. | | = | | ft savings accounts, or other pension or profit-sharing plans | | |
| | No. | | - , | G. C. Carrier, C. Carrier, E. Pront Graining Prairie | | |
| | = | Deserti | Type of account and Institut | ion namo: | | |
| | Yes. | Describe | Type of account and Institut | IUII Hame. | • | 0.00 |
| | 0 | | | | \$ | 0.00 |
| 22. | _ | eposits and pre | | | | |
| | | | | may continue service or use from a company | | |
| | | Agreements with I | andiorus, prepaid rent, public utili | ties (electric, gas, water), telecommunications | | |
| | No. | | | | | |
| | Yes. | Describe | Institution name or individua | il: | | |
| | | | | | \$ | 0.00 |
| 23. | Annuities | (A contract for | a periodic payment of mone | y to you, either for life or for a number of years) | | |
| | No. | | | | | |
| | Yes. | Describe | Issuer name and description | 1: | | |
| | | | | | \$ | 0.00 |
| 24. | Interests in | n an education | IRA, in an account in a quali | fied ABLE program, or under a qualified state tuition program. | * | |
| | | | (b), and 529(b)(1). | | | |
| | No. | , -20, | V Programme Control | | | |
| | = ., | Desertie | Institution name and descrip | ation. Sanarately file the records of any intercets 11 LLS C. S. 501/ov | | |
| | Yes. | Describe | manunum name and descrip | otion. Separately file the records of any interests.11 U.S.C. § 521(c): | • | 0.00 |
| 25 | T4- | uitable | . Interests in many 1 1 11 | then envilling listed in line 4) and sinks | \$ | 0.00 |
| 25. | | uitable or future | interests in property (other | than anything listed in line 1), and rights or powers | | |
| | No. | | | | | |
| | Yes. | Describe | | | | |
| | | | | | <u> </u> | 0.00 |
| 26. | Patents, co | opyrights, trade | marks, trade secrets, and o | ther intellectual property | | |
| | | | | pyalties and licensing agreements | | |
| | No. | | | | | |
| | Yes. | Describe | | | | |
| | L 163. | Describe | | | \$ | 0.00 |
| 27 | Licenses | franchiege and | other general intangibles | | Ψ | |
| 21. | | | - | ssociation holdings, liquor licenses, professional licenses | | |
| | No. | Danumy pointing, t | | account in the state of the sta | | |
| | = ., | . | | | | |
| | Yes. | Describe | | | | |
| | | | | | <u> </u> | <u>0.0</u> 0 |
| | | | | | | |

Keith

Case 16-29661

Doc 1

Desc Main

First Name Middle Name Filed 09/17/16
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Document
Last Name

Entered 09/17/16 09:41:50 Page 13 of 67 humber (if known)

| Мо | ney or prop | erty owed to yo | u? | portion yo | uct secured | |
|-----|---------------|----------------------|--|-----------------------|--------------|----------|
| 28. | Tax refund | s owed to you | | | | |
| | No. | - | | | | |
| | Yes. | Describe | | | | |
| | _ | | | | \$ | 0.00 |
| 29. | Family sup | - | | | | |
| | | Past due or lump s | um alimony, spousal support, child support, maintenance, divorce settlement, property settlement | | | |
| | No. | | | | | |
| | Yes. | Describe | | | ¢ | 0.00 |
| 30. | Other amo | unts someone c | Wes vou | | Ψ | 0.00 |
| | Examples: I | Unpaid wages, disa | ability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, id loans you made to someone else | | | |
| | Yes. | Describe | | | ¢ | 0.00 |
| 31 | Interest in | insurance polic | ies | | a | 0.00 |
| " | | • | r life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance | | | |
| | No. | | Company Name & Beneficiary: | | | |
| | Yes. | Describe | | | | |
| | | | Term Life Insurance \$6 | | | |
| | | | | | \$ | 0.00 |
| 32. | If you are th | ne beneficiary of a | at is due you from someone who has died iving trust, expect proceeds from a life insurance policy, or are currently entitled to receive | | | |
| | | cause someone ha | as died. | | | |
| | No. | 5 " | | | | |
| | Yes. | Describe | | | \$ | 0.00 |
| 33. | _ | - | s, whether or not you have filed a lawsuit or made a demand for payment ment disputes, insurance claims, or rights to sue | | <u> </u> | |
| | Yes. | Describe | | | • | 0.00 |
| 34. | Other cont | ingent and unlic | uidated claims of every nature, including counterclaims of the debtor and rights | | \$ | 0.00 |
| | No. | | , | | | |
| | Yes. | Describe | | | | |
| | _ | | | | \$ | 0.00 |
| 35. | Any financ | ial assets you d | id not already list | | | |
| | No. | | | | | |
| | Yes. | Describe | | | | |
| | | | | | \$ | 0.00 |
| 26 | Add the de | ller value of all | of your entries from Bort A including any entries for pages you have attached | | | |
| | | | of your entries from Part 4, including any entries for pages you have attached er here | | | \$100.00 |
| | 101 Fait 4. V | viite tiiat iiuiiibi | | | | |
| | art 5: D | escribe Any Bus | iness-Related Property You Own or Have an Interest In. List any real estate in Part 1. | | | |
| | al Col | | | | | |
| 31. | No. | ii or iiave aliy ie | gal or equitable interest in any business-related property? | | | |
| | Yes. | | | | | |
| | 1 es. | | | | | |
| | | | | | alue of the | е |
| | | | | portion y Do not ded | duct secured | l claims |
| | | | | or exempti | | |
| 38. | Accounts r | eceivable or co | mmissions you already earned | | | |
| | No. | | | | | |
| | Yes. | Describe | | | | |
| | | | | | \$ | 0.00 |

Case 16-29661 Keith

Doc 1

Filed 09/17/16
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Document
Last Name

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Desc Main

First Name

Middle Name

| ••• | | | ngs, and supplies omputers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices | |
|--------------------------|--|---|--|-----------------------|
| | No. | | | |
| | Yes. | Describe | | \$ 0.00 |
| 40. | Machinery | , fixtures, equip | ment, supplies you use in business, and tools of your trade | * |
| | No. | D | | |
| | Yes. | Describe | | \$0.00 |
| 41. | Inventory | | | |
| | No. Yes. | Describe | | |
| | | Describe | | \$0.00 |
| 42. | Interests in No. | n partnerships o | or joint ventures | |
| | Yes. | Describe | Name of Entity and Percent of Ownership: | |
| | | | | \$0.00 |
| 43. | No. | lists, mailing lis | ts, or other compilations | |
| | Yes. | Describe | | |
| 44 | Any husin | ass_ralated nro | perty you did not already list | \$0.00 |
| 77. | No. | ess-related proj | verty you did not already list | |
| | Yes. | Describe | | |
| | | | | \$ <u>0.0</u> 0 |
| 45. | Add the do | llar value of all | of your entries from Part 5, including any entries for pages you have attached | |
| 1 | or Part 5. | Write that numb | per here> | \$ 0.00 |
| P | all G G L | | m- and Commercial Fishing-Related Property You Own or Have an Interest In. | |
| | | f vou own or ha | ve an interest in farmland, list it in Part 1. | |
| 46. | | | | |
| 46. | | | egal or equitable interest in any farm- or commercial fishing-related property? | |
| 46. | Do you ow | | | 0.00 |
| | No. | n or have any lo | | \$0.00 |
| | No. Yes. Farm anim Examples: | n or have any lo | egal or equitable interest in any farm- or commercial fishing-related property? | \$ <u>0.0</u> 0 |
| | No. Yes. Farm anim Examples: No. | Describe als Livestock, poultry, | egal or equitable interest in any farm- or commercial fishing-related property? | \$0.00 |
| 47. | No. Yes. Farm anim Examples: No. Yes. | Describe als Livestock, poultry, Describe | egal or equitable interest in any farm- or commercial fishing-related property? farm-raised fish | \$ <u>0.00</u> |
| 47. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit | Describe als Livestock, poultry, | egal or equitable interest in any farm- or commercial fishing-related property? farm-raised fish | <u></u> |
| 47. | No. Yes. Farm anim Examples: No. Yes. | Describe als Livestock, poultry, Describe | egal or equitable interest in any farm- or commercial fishing-related property? farm-raised fish | <u></u> |
| 47 . 48 . | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. | Describe Describe Describe Describe Describe | egal or equitable interest in any farm- or commercial fishing-related property? farm-raised fish harvested | <u></u> |
| 47 . 48 . | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. | Describe Describe Describe Describe Describe | egal or equitable interest in any farm- or commercial fishing-related property? farm-raised fish | \$ <u>0.0</u> 0 |
| 47 . 48 . | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. | Describe Describe Describe Describe Describe | egal or equitable interest in any farm- or commercial fishing-related property? farm-raised fish harvested | \$\$ \$0.00 |
| 47. 48. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and to No. Yes. | Describe Describe Describe Describe Cher growing or Describe Describe | egal or equitable interest in any farm- or commercial fishing-related property? farm-raised fish harvested ent, implements, machinery, fixtures, and tools of trade | \$ <u>0.0</u> 0 |
| 47. 48. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and to No. Yes. | Describe Describe Describe Describe Cher growing or Describe Describe | egal or equitable interest in any farm- or commercial fishing-related property? farm-raised fish harvested | \$\$ \$0.00 |
| 47. 48. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and to Yes. | Describe Describe Describe Describe Cher growing or Describe Describe | egal or equitable interest in any farm- or commercial fishing-related property? farm-raised fish harvested ent, implements, machinery, fixtures, and tools of trade | \$\$ \$0.00 \$0 |
| 47. 48. 49. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and f No. Yes. | Describe Describe Describe Describe Cher growing or Describe Describe Fishing equipments Describe Fishing supplies Describe | egal or equitable interest in any farm- or commercial fishing-related property? farm-raised fish harvested ent, implements, machinery, fixtures, and tools of trade | \$\$ \$0.00 |
| 47. 48. 49. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and f No. Yes. | Describe Describe Describe Describe Cher growing or Describe Describe Fishing equipments Describe Fishing supplies Describe | farm-raised fish harvested int, implements, machinery, fixtures, and tools of trade , chemicals, and feed | \$\$ \$0.00 \$0 |
| 47. 48. 49. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and f No. Yes. Farm and f No. Yes. | Describe Describe Describe Describe Cher growing or Describe Describe Fishing equipments Describe Fishing supplies Describe | farm-raised fish harvested int, implements, machinery, fixtures, and tools of trade , chemicals, and feed | \$\$ \$0.00 \$0 |
| 47. 48. 49. 50. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and to No. Yes. Farm and to No. Yes. Any farm- No. Yes. | Describe Describe Describe Describe Cher growing or Describe Describe Fishing equipments Describe Describe Describe Describe Describe | farm-raised fish harvested int, implements, machinery, fixtures, and tools of trade , chemicals, and feed If ishing-related property you did not already list | \$\$ \$0.00 \$0 |
| 47. 48. 49. 50. | Do you ow No. Yes. Farm anim Examples: No. Yes. Crops—eit No. Yes. Farm and farm and farm- No. Yes. Any farm- Yes. Add the do | Describe cher growing or Describe cher growing or Describe fishing equipme Describe fishing supplies Describe and commercia Describe | farm-raised fish harvested int, implements, machinery, fixtures, and tools of trade , chemicals, and feed | \$\$ \$0.00 \$0 |

Case 16-29661 Keith

Doc 1

Desc Main

First Name

Middle Name

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| Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Al | pove | |
|--|--------------|-----------------|
| 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. | | |
| Yes. Describe | | \$ <u>0.0</u> 0 |
| 54. Add the dollar value of all of your entries from Part 7. Write that number here | > | \$0.00 |
| Part 8: List the Totals of Each Part of this Form | | |
| 55. Part 1: Total real estate, line 2 | | \$ 0.00 |
| 56. Part 2: Total vehicles, line 5 | \$ 13,950.00 | |
| 57. Part 3: Total personal and household items, line 15 | \$ 2,500.00 | |
| 58. Part 4: Total financial assets, line 36 | \$ 100.00 | |
| 59. Part 5: Total business-related property, line 45 | \$ 0.00 | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | \$ 0.00 | |
| 61. Part 7: Total other property not listed, line 54 | \$ 0.00 | |
| 62. Total personal property. Add lines 56 through 61 | \$ 16,550.00 | \$ 16,550.00 |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 | | \$16,550.00 |

Official Form 106A/B Schedule A/B: Property Page 6 of 6 Record # 718038

| Fill in this in | formation to identif | y your case: | |
|---------------------|------------------------|------------------------------------|----------------------|
| Debtor 1 | Keith | Carter | Broadney |
| | First Name | Middle Name | Last Name |
| Debtor 2 | Deborah | Ann | Broadney |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for t | ne : <u>NORTHERN</u> District of _ | _ILLINOIS (State) |
| Case Number | r | | (otate) |
| (If known) | | | _ |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| | emptions are you claiming? Check | cone only even if your sn | ouse is filing with you | | | | | |
|-------------------------|--|--------------------------------------|---|--------------------------------------|--|--|--|--|
| _ | | | | | | | | |
| _ | You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | |
| You are cial | ming rederal exemptions. 11 0.5.C. | § 522(D)(Z) | | | | | | |
| 2. For any propert | y you list on <i>Schedule A/B</i> that yo | u claim as exempt, fill in | the information below. | | | | | |
| • | on of the property and line on hat lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption | | | | |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | | | | | |
| Brief description: | 2013 Chevrolet Malibu with over 50,000 miles | \$ <u>13,950</u> | \$ _ 2,400 | 735 ILCS 5/12-1001(c) - \$2,400.00 | | | | |
| Line from Schedule A/B: | 03 | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| Brief description: | Furniture, linens, small appliances, table & chairs, bedroom set | \$_1,000 | | 735 ILCS 5/12-1001(b) - \$1,000.00 | | | | |
| Line from Schedule A/B: | 06 | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| Brief description: | Flat screen TV, computer, printer, music collection, cell phone | \$_500 | | 735 ILCS 5/12-1001(b) - \$500.00 | | | | |
| Line from Schedule A/B: | <u>07</u> | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| Brief description: | Everyday clothes, 1 old fur, designer wear, shoes, accessories | \$_ 500 | \$ | 735 ILCS 5/12-1001(a),(e) - \$500.00 | | | | |
| Line from Schedule A/B: | <u>11</u> | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | | | | | | | | |
| Official Form 106C | Record # 718038 | Schedule C: T | The Property You Claim as Exempt | Page 1 of 2 | | | | |

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Last Name

Document Keith Carter Debtor 1 Middle Name

Additional Page Part 2: Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption Schedule A/B Brief 735 ILCS 5/12-1001(b) - \$500.00 Everyday jewelry, costume description: jewelry, engagement ring, wedding \$ 500 rings, Line from 100% of fair market value, up to 12 Schedule A/B: any applicable statutory limit 735 ILCS 5/12-1001(b) - \$100.00 Brief Checking Account, Chase 100 Checking, 100.00 description: 100% of fair market value, up to Line from 17 any applicable statutory limit Schedule A/B: 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ Yes. 718038 Official Form 106C Record # Schedule C: The Property You Claim as Exempt Page 2 of 2

| 'III III IIIS II | nformation to identi | ify your case: | oc 1 | 8 of 67 | | 2000 Main | |
|--|---|--|--|--|---|--|-------------------------------|
| Debtor 1 | Keith | Carter | Broadney | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | Deborah | Ann | Broadney | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States | Bankruptcy Court for t | the : <u>NORTHERN</u> | District of <u>ILLINOIS</u> | | | | |
| | | | (State) | | | Check if this | s is an |
| Case Numbe (If known) | r | | | | | amended fi | |
| £: -: - | 10CD | | | | | amonada m | 9 |
| <u> Ticiai F</u> | <u>orm 106D</u> | | | | | | |
| hedule | D: Creditor | s Who Have | Claims Secured by P | Property | | | 1: |
| No. Cr | ill in all of the informa | ubmit this form to the | e court with your other schedules. Yo | ou have nothing else to rep | ort on this form. | | |
| | | | | | | | |
| Part 1: | List All Secured Clai | ims | | | | | |
| CATC III | | | an one secured claim. list the credito | r separately | Column A | Column A | |
| List all se | cured claims. If a c | reditor has more that | an one secured claim, list the creditor | · · | Amount of claim | Value of collateral | |
| List all se | ecured claims. If a c | reditor has more that | | in Part 2. | | | Unsecure |
| List all se | ecured claims. If a c claim. If more than o as possible, list the o | reditor has more that | articular claim, list the other creditors | in Part 2. ime. | Amount of claim Do not deduct the | Value of collateral that supports this | |
| List all se for each c As much a | ecured claims. If a collaim. If more than of as possible, list the contact | reditor has more that | articular claim, list the other creditors al order according to the creditors na | in Part 2. ime. es the claim: | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| List all se for each c As much a GM Fin Creditor's | ecured claims. If a collaim. If more than of as possible, list the contact | reditor has more that | articular claim, list the other creditors all order according to the creditors nat the property that secure | in Part 2. ime. es the claim: | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| List all se for each c As much a GM Fin Creditor's | ecured claims. If a collaim. If more than of as possible, list the contant | reditor has more that | articular claim, list the other creditors all order according to the creditors nat the property that secure | in Part 2. ime. es the claim: | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| List all se for each c As much a GM Fin Creditor's Po Box | ecured claims. If a collaim. If more than of as possible, list the conancial Name 181145 | reditor has more that | articular claim, list the other creditors all order according to the creditors nat the property that secure | in Part 2. ime. es the claim: 50,000 miles | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| List all se for each c As much a GM Fin Creditor's Po Box Number | ecured claims. If a colaim. If more than of as possible, list the conancial Name 181145 Street | ereditor has more that one creditor has a pa claims in alphabetica | articular claim, list the other creditors all order according to the creditors nat pescribe the property that secure 2013 Chevrolet Malibu with over | in Part 2. ime. es the claim: 50,000 miles | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| List all se for each c As much a GM Fin Creditor's Po Box Number | ecured claims. If a colaim. If more than of as possible, list the conancial Name 181145 Street | ereditor has more that one creditor has a pactains in alphabetical materials. | Describe the property that secure 2013 Chevrolet Malibu with over As of the date you file, the claim in | in Part 2. ime. es the claim: 50,000 miles | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| List all se for each c As much a GM Fin Creditor's Po Box Number | ecured claims. If a colaim. If more than of as possible, list the conancial Name 181145 Street | ereditor has more that one creditor has a pa claims in alphabetica | articular claim, list the other creditors all order according to the creditors nature. Describe the property that secure 2013 Chevrolet Malibu with over As of the date you file, the claim in Contingent | in Part 2. ime. es the claim: 50,000 miles | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| List all se for each c As much a GM Fin Creditor's Po Box Number Arlingto City | ecured claims. If a colaim. If more than of as possible, list the conancial Name 181145 Street | ereditor has more that one creditor has a pactains in alphabetical management of the creditor has a pactains in alphabetical management of the creditor has a pactain of the creditor has | articular claim, list the other creditors all order according to the creditors nated and the creditors of the property that secures 2013 Chevrolet Malibu with over the according to the claim in Contingent Unliquidated | in Part 2. ime. es the claim: 50,000 miles is: Check all that apply. | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| City List all se for each c As much a As much a As much a As much a Arlingto City | ccured claims. If a colaim. If more than of as possible, list the contant of the | ereditor has more that one creditor has a pactains in alphabetical management of the creditor has a pactains in alphabetical management of the creditor has a pactain of the creditor has | articular claim, list the other creditors all order according to the creditors nated and order according to the creditors nated and order according to the creditors nated and order according to the claim in the cl | in Part 2. ame. es the claim: 50,000 miles is: Check all that apply. | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| List all se for each c As much a GM Fin Creditor's Po Box Number Arlingto City Who owes | ccured claims. If a colaim. If more than of as possible, list the contant of the | ereditor has more that one creditor has a pactains in alphabetical management of the creditor has a pactains in alphabetical management of the creditor has a pactain of the creditor has | articular claim, list the other creditors all order according to the creditors nature of the property that secure 2013 Chevrolet Malibu with over As of the date you file, the claim is Contingent Unliquidated Disputed Nature of Lien. Check all that apply | in Part 2. ame. es the claim: 50,000 miles is: Check all that apply. | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| List all se for each c As much a GM Fin Creditor's Po Box Number Arlingto City Who owes Debtor Debtor | ccured claims. If a colaim. If more than of as possible, list the contant of the | ereditor has more that one creditor has a pactains in alphabetical management of the creditor has a pactains in alphabetical management of the creditor has a pactain of the creditor has | As of the date you file, the claim is Contingent Unliquidated Disputed Nature of Lien. Check all that apply An agreement you made (such as | in Part 2. ame. es the claim: 50,000 miles is: Check all that apply. | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| List all se for each c As much a GM Fin Creditor's Po Box Number Arlingto City Who owes Debtor Debtor Debtor | ccured claims. If a colaim. If more than of as possible, list the conancial Name 181145 Street Street on 1 only 2 only | oreditor has more that one creditor has a paclaims in alphabetical management of the control of the creditor o | articular claim, list the other creditors all order according to the creditors nate of the property that secure 2013 Chevrolet Malibu with over 2013 Chevrolet | in Part 2. ime. set the claim: 50,000 miles is: Check all that apply. y. s mortgage or secured sechanic's lien) | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| List all se for each c As much a GM Fin Creditor's Po Box Number Arlingto City Who owes Debtor Debtor Debtor At leas: | ccured claims. If a calaim. If more than of as possible, list the canancial Name 181145 Street Street on 1 only 2 only 1 and Debtor 2 only t one of the debtors and | TX 76096 State Zip Code | articular claim, list the other creditors all order according to the creditors nated and order according to the creditors nated and order according to the creditors nated and order according to the creditors of the date you file, the claim is a contingent and order according to the contingent according to the continuous according to the creditors and order according to the creditors according to the creditors and order according to the creditors a | in Part 2. ime. set the claim: 50,000 miles is: Check all that apply. y. s mortgage or secured sechanic's lien) | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |
| List all se for each c As much a GM Fin Creditor's Po Box Number Arlingto City Who owes Debtor Debtor At leas: Check comm | ccured claims. If a colaim. If more than of as possible, list the conancial Name 181145 Street on 1 only 2 only 1 and Debtor 2 only t one of the debtors and a fifthis claim relates cunity debt | TX 76096 State Zip Code | articular claim, list the other creditors all order according to the creditors nate of the property that secure 2013 Chevrolet Malibu with over 2013 Chevrolet | in Part 2. ime. set the claim: 50,000 miles is: Check all that apply. y. s mortgage or secured sechanic's lien) | Amount of claim Do not deduct the value of collateral | Value of collateral that supports this claim | Unsecure portion If any |

| Fil | ll in this | Caco 16 2 | | 2.1 Filod 00/17/16 | Entered 09/ 9 of 6 | | 1:50 | Desc Mair | ı |
|--|---|--|---|--|--|---|--|---------------------------|-------------------|
| Б | | Keith | Carter | Broadney | | | | | |
| D | ebtor 1 | First Name | Middle Name | Last Name | | | | | |
| D | ebtor 2 | Deborah | Ann | Broadney | | | | | |
| | pouse, if filing | j) First Name | Middle Name | Last Name | | | | | |
| 116 | nited State | es Bankruptcy Court for the | · NORTHERN I | District of JLLINOIS | | | | | |
| 0. | intou otat | es burnitapley obuilt for the | | (State) | | | | Chock | if this is an |
| | ase Numb f known) | per | | | | | | _ | ed filing |
| | | Form 106E/F e E/F: Credito | rs Who Hav | e Unsecured Claims | | | | | 12/1 |
| List ti A/B: I credit neede top of | he other Property tors with ed, copy | party to any executory (Official Form 106A/B partially secured clain | y contracts or une. and on Schedule ms that are listed i it out, number the our name and case | , , | claim. Also list exe pired Leases (Offic Claims Secured by | cutory contracts ial Form 106G). D / Property. If mor | on Schedul o not includ e space is | e | |
| 1. C | o any c | reditors have priority u | unsecured claims a | against you? | | | | | |
| Г | J No. (| Go to Part 2. | | | | | | | |
| | Yes. | | | | | | | | |
| e r | each clai nonpriori unsecure | m listed, identify what to ty amounts. As much as ed claims, fill out the Co | ype of claim it is. If a spossible, list the continuation Page of | ditor has more than one priority unsect a claim has both priority and nonprior claims in alphabetical order according Part 1. If more than one creditor holds instructions for this form in the instruct | ity amounts, list tha to the creditor's na s a particular claim, | t claim here and s me. If you have m | show both proore than two | riority and o priority | |
| | | | | | | To | tal claim | Priority | Nonpriority |
| 0.4 |] IRS F | Priority Debt | | Last 4 digita of account number | | s 5 | 0.00 | amount \$ 50.00 | amount \$ 0.00 |
| 2.1 | | r's Name | | Last 4 digits of account number _ | | <u> </u> | 0.00 | φ <u>σσ.σσ</u> | Ψ <u>σ.σσ</u> |
| | PO B | ox 7346 | | When was the debt incurred? | 2012 | | | | |
| | Numbe | er Street | | | | | | | |
| | | | | As of the date you file, the claim is | : Check all that apply. | | | | |
| | Philad | delphia I | PA 19101 | Contingent | | | | | |
| | City | | State Zip Code | Unliquidated | | | | | |
| | _ | res the debt? Check one. | | Disputed | | | | | |
| | = | or 1 only | | Town of DDIODITY | | | | | |
| | = | or 2 only | | Type of PRIORITY unsecured claim | 1: | | | | |
| | = | or 1 and Debtor 2 only | | Domestic support obligations | owe the government | | | | |
| | = | ast one of the debtors and | | Taxes and certain other debts you | owe tne government | | | | |
| | _ | ck if this claim relates to | а | Olaina faa day! | | | | | |
| | | munity debt aim subject to offest? | | Claims for death or personal injury | wniie you were | | | | |
| | No | ann aubject to oneat? | | intoxicated | | | | | |
| | Yes | | | Other. Specify | | | | | |
| | 100 | | | | | | | | |

Debtor 1 Keith Carter Document Page 20 of 67
Case Number (if known)

First Name Middle Name Last Nam

Part 1:

Your PRIORITY Unsecured Claims - Continuation Page

| ting any entries on this page, number them | beginning with 2.3, followed by 2.4, and | so forth. | Total claim | Priority amount | Nonpri amoun |
|--|---|-----------------------|--------------------|--------------------|-----------------|
| IRS Priority Debt | Last 4 digits of account number | | \$ <u>100.00</u> | \$ <u>100.00</u> | \$ <u>0.00</u> |
| Creditor's Name | | 2015 | | | |
| PO Box 7346 | When was the debt incurred? | 2015 | | | |
| Number Street | | | | | |
| | As of the date you file, the claim is: | Check all that apply. | | | |
| Philadelphia PA 19101 | Contingent | | | | |
| City State Zip Code | Unliquidated | | | | |
| ho owes the debt? Check one. | Disputed | | | | |
| Debtor 1 only | | | | | |
| Debtor 2 only | Type of PRIORITY unsecured claim: | | | | |
| Debtor 1 and Debtor 2 only | Domestic support obligations | | | | |
| At least one of the debtors and another | Taxes and certain other debts you ow | e the government | | | |
| Check if this claim relates to a | _ | | | | |
| community debt | Claims for death or personal injury wh | nile you were | | | |
| the claim subject to offest? | intoxicated | | | | |
| No Yes | Other. Specify | | | | |
| IRS Priority Debt | Last 4 digits of account number | | \$ 1,500.00 | \$ 1,500.00 | \$ 0.00 |
| Creditor's Name | Lust 4 digits of account number | | * | - | • |
| PO Box 7346 | When was the debt incurred? | 2014 | | | |
| Number Street | | | | | |
| | As of the date you file, the claim is: 0 | Check all that apply. | | | |
| | Contingent | | | | |
| Philadelphia PA 19101 | Unliquidated | | | | |
| City State Zip Code //ho owes the debt? Check one. | Disputed | | | | |
| ٦ | | | | | |
| Debtor 1 only Debtor 2 only | Type of PRIORITY unacquired eleims | | | | |
| Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured claim: Domestic support obligations | | | | |
| At least one of the debtors and another | Taxes and certain other debts you ow | e the government | | | |
| | Taxes and certain other debts you ow | e the government | | | |
| Check if this claim relates to a community debt | Claims for death or personal injury wh | nile vou were | | | |
| the claim subject to offest? | intoxicated | , | | | |
| No | Other. Specify | | | | |
| Yes | | | | | |
| IRS Priority Debt | Last 4 digits of account number | | \$ <u>1,500.00</u> | <u>\$ 1,500.00</u> | \$ <u>0.00</u> |
| Creditor's Name PO Box 7346 | When was the debt incurred? | 2012 | | | |
| | when was the debt incurred? | | | | |
| Number Street | | | | | |
| | As of the date you file, the claim is: (| Check all that apply. | | | |
| Philadelphia PA 19101 | Contingent | | | | |
| City State Zip Code | Unliquidated | | | | |
| ho owes the debt? Check one. | Disputed | | | | |
| Debtor 1 only | | | | | |
| Debtor 2 only | Type of PRIORITY unsecured claim: | | | | |
| Debtor 1 and Debtor 2 only | Domestic support obligations | | | | |
| At least one of the debtors and another | Taxes and certain other debts you ow | e the government | | | |
| Check if this claim relates to a | | | | | |
| community debt | Claims for death or personal injury wh | nile you were | | | |
| the claim subject to offest? | intoxicated | | | | |
| | Other. Specify | | | | |

Doc 1 Filed 09/17/16 Entered 09/17/16 09:41:50 Desc Main Case 16-29661 Page 21 of 67 Case Number (if known) Document Keith Carter Debtor 1 Your PRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim **Priority** Nonpriority amount amount \$ 1,500.00 \$ 0.00 IRS Priority Debt \$ 1,500.00 2.5 Last 4 digits of account number _ Creditor's Name 2013 When was the debt incurred? PO Box 7346 As of the date you file, the claim is: Check all that apply. Contingent Philadelphia PA 19101 Unliquidated State Zip Code Disputed Who owes the debt? Check one Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Check if this claim relates to a community debt Claims for death or personal injury while you were Is the claim subject to offest? intoxicated No Other. Specify _ Yes IRS Priority Debt \$ 1,500.00 \$ 1,500.00 \$ 0.00 2.6 Last 4 digits of account number _ Creditor's Name 2015 PO Box 7346 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Philadelphia PA 19101 Unliquidated State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim relates to a community debt Claims for death or personal injury while you were Is the claim subject to offest? intoxicated No Other. Specify _

Part 2: List All of Your NONPRIORITY Unsecured Claims

 $\ensuremath{\mathtt{3.}}$ Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

| Debtor 1 | Keith Carter | Page 22 of 67 | |
|----------|--|--|--------------------|
| | First Name Middle Name | Last Name | |
| 4.1 | 1ST FINL Invstmnt FUND | Last 4 digits of account number4773 | \$ <u>2,705.00</u> |
| | Creditor's Name | 2012 2012 | |
| | 3091 Governors Lake Dr | When was the debt incurred? 2013-2013 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Peachtree Corners GA 30071 | Unliquidated | |
| | City State Zip Code | Disputed | |
| ₩ ¥ | /ho owes the debt? Check one. | □ - · · · · · · · · · · · · · · · · · · | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| L | Check if this claim relates to a | that you did not report as priority claims | |
| 10 | community debt the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| 13 | | Madical Dabi | |
| | No | Other. Specify Medical Debt | |
| 40 | Yes Acceptance NOW | Last 4 digits of account number 1489 | \$ 2,639.00 |
| 4.2 | Creditor's Name | Last 4 digits of account number | <u> </u> |
| | 5501 Headquarters Dr | When was the debt incurred? 2015-2016 | |
| | Number Street | | |
| | | As of the date were filler than also be Olive I all the control | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Plano TX 75024 | Contingent | |
| | City State Zip Code | Unliquidated | |
| W | ho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| [| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| Ē | Check if this claim relates to a | that you did not report as priority claims | |
| - | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is | the claim subject to offest? | | |
| | No | Other. Specify Housing/Rental/Lease | |
| | Yes | | |
| 4.5 | AT T | Last 4 digits of account number 5030 | \$ <u>191.00</u> |
| | Creditor's Name | When was the debt incurred? 2015-2015 | |
| | 8014 Bayberry Rd | When was the debt incurred? 2015-2015 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Jacksonville FL 32256 | Unliquidated | |
| l w | City State Zip Code Vho owes the debt? Check one. | Disputed | |
| _ | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | | that you did not report as priority claims | |
| L | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ls | the claim subject to offest? | Depose to herizioni di biolitzarianna bignia, gira ottigi annigi nenta | |
| | No | Other. Specify Collecting for Creditor | |
| | Yes | Outor. Opening | |

Doc 1 Filed 09/17/16 Entered 09/17/16 09:41:50 Desc Main Case 16-29661 Page 23 of 67 Case Number (if known) Document Keith Carter Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| 4.4 | AT T | Last 4 digits of account number | 0059 | \$ <u>204.00</u> |
|----------|--|---|------------------------------|------------------|
| | Creditor's Name | | 0040 0040 | |
| | 2703 N Highway 75 | When was the debt incurred? | 2010-2010 | |
| | Number Street | | | |
| | | As of the date you file, the claim is: | Check all that apply. | |
| | | Contingent | , | |
| | Sherman TX 75090 | Unliquidated | | |
| ١. | City State Zip Code | Disputed | | |
| ' | Who owes the debt? Check one. | | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured cl | laim: | |
| إ | Debtor 1 and Debtor 2 only | Student loans | | |
| | At least one of the debtors and another | Obligations arising out of a separation | - | |
| [| Check if this claim relates to a | that you did not report as priority clai | | |
| Ι. | community debt | Debts to pension or profit-sharing pla | ans, and other similar debts | |
| li | s the claim subject to offest? | | | |
| | No Ty | Other. Specify Collecting for Cr | reditor | |
| 4.5 | Yes AT T | Lost 4 digits of account number | 8496 | \$ 205.00 |
| 4.5 | Creditor's Name | Last 4 digits of account number | | <u> </u> |
| | 8014 Bayberry Rd | When was the debt incurred? | 2013-2014 | |
| | Number Street | | | |
| | | As a fall and a second the about a later to | Object all the description | |
| | | As of the date you file, the claim is: | Спеск ан тлат арріу. | |
| | Jacksonville FL 32256 | Contingent | | |
| | City State Zip Code | Unliquidated | | |
| V | Who owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | | | |
| [| Debtor 2 only | Type of NONPRIORITY unsecured cl | laim: | |
| | Debtor 1 and Debtor 2 only | Student loans | | |
| | At least one of the debtors and another | Obligations arising out of a separation | on agreement or divorce | |
| 1 [| Check if this claim relates to a | that you did not report as priority clai | ms | |
| ' | community debt | Debts to pension or profit-sharing pla | ans, and other similar debts | |
| ! | s the claim subject to offest? | | | |
| | No | Other. Specify Collecting for Cr | reditor | |
| | Yes | | 2050 | + 101 00 |
| 4.6 | AT T - Illinois | Last 4 digits of account number | 3259 | \$ <u>191.00</u> |
| | Creditor's Name 4145 Shackleford Rd Ste | When was the debt incurred? | 2012-2013 | |
| | Number Street | When was the dest meaned: | | |
| | Number Street | | | |
| | | As of the date you file, the claim is: | Check all that apply. | |
| | Norcross GA 30093 | Contingent | | |
| | | Unliquidated | | |
| v | City State Zip Code Who owes the debt? Check one. | Disputed | | |
| [| Debtor 1 only | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured c | laim: | |
| | Debtor 1 and Debtor 2 only | Student loans | | |
| | At least one of the debtors and another | Obligations arising out of a separation | on agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority clai | - | |
| 1 4 | community debt | Debts to pension or profit-sharing pla | | |
| <u> </u> | s the claim subject to offest? | | | |
| | No | Other. Specify Collecting for Cr | reditor | |
| 1 [| ¬ _{voo} | | | |

| | | Case 16-29661 | Doc 1 | | Entered 09/17/16 09:41:50 | Desc Main |
|----------|------------|---------------------------|-----------------|-----------|---------------------------------|-----------|
| Debtor 1 | Keith | Carter | | Document | Page 24 of 67 Number (if known) | |
| | First Name | Middle Name | | Last Name | | |
| Part 2: | Your | NONPRIORITY Unsecured Cla | nims - Continua | tion Page | | |

| After I | isting any entries on this page, number them b | eginning with 4.4, followed by 4.5, and so forth. | Total Claim |
|---------|--|---|--------------------|
| 4.7 | Banfield Pet Hospital | Last 4 digits of account number | <u>\$ 220.00</u> |
| | Creditor's Name | • | |
| | 1101 S. Canal St | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago IL 60607 | Unliquidated | |
| Ι, | City State Zip Code | Disputed | |
| | Who owes the debt? Check one. | □ | |
| | Debtor 1 only | Town (MONDPIONITY and Alleline | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a community debt | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offest? | Debts to pension or pront-snaming plans, and other similar debts | |
| | No | Other. Specify | |
| | Yes | Other. Specify | |
| 4.8 | Capital ONE BANK USA N | Last 4 digits of account number NULL | \$ 682.00 |
| | Creditor's Name | 2045-2040 | |
| | 15000 Capital One Dr | When was the debt incurred? 2015-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Richmond VA 23238 | Unliquidated | |
| | City State Zip Code Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | = ' | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offest? | Debts to perision of profit-straining plans, and other similar debts | |
| | No | Other. Specify | |
| | Yes | Cition Opcomy | |
| 4.9 | Capital ONE BANK USA N | Last 4 digits of account number NULL | \$ <u>1,743.00</u> |
| | Creditor's Name | 2015 2016 | |
| | 15000 Capital One Dr | When was the debt incurred? 2015-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Richmond VA 23238 | Unliquidated | |
| , | City State Zip Code Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | _ | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | = | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offest? | 2000 to periodical profit originity profits, and outlot offilial doubts | |
| | No | Other. Specify Credit Card or Credit Use | |
| | Yes | <u> </u> | |
| | | | |

Doc 1 Filed 09/17/16 Entered 09/17/16 09:41:50 Desc Main Case 16-29661 Page 25 of 67 Case Number (if known) Document Keith Carter Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| 4.10 | CBNA | Last 4 digits of account number NULL | <u>\$ 864.00</u> |
|-------|--|---|--------------------|
| | Creditor's Name | 2000 2016 | |
| | Po Box 6497 | When was the debt incurred? 2000-2016 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Sioux Falls SD 57117 | Unliquidated | |
| | City State Zip Code | Disputed | |
| ľ | Who owes the debt? Check one. | | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| [| Check if this claim relates to a | that you did not report as priority claims | |
| | community debt s the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| Î | No | Candit Cand or Candit llan | |
| 1 6 | Yes | Other. Specify Credit Card or Credit Use | |
| 4 11 | CDA/Pontiac | Last 4 digits of account number | \$ 352.00 |
| 4.11 | Creditor's Name | Last 4 digits of account manifer | · |
| | 415 E. Main St. | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file the plain in Obsel all that are by | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Streator IL 61364 | Contingent | |
| | City State Zip Code | Unliquidated | |
| V | Who owes the debt? Check one. | Disputed | |
| [| Debtor 1 only | | |
| [| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| ΙГ | Check if this claim relates to a | that you did not report as priority claims | |
| " | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| li li | s the claim subject to offest? | | |
| | No | Other. Specify Credit Card or Credit Use | |
| - | Yes | | * 4 700 00 |
| 4.12 | City of Chicago Bureau Parking | Last 4 digits of account number | \$ <u>1,700.00</u> |
| | Creditor's Name PO Box 88292 | When was the debt incurred? | |
| | Number Street | | |
| | Number Oneset | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Chicago IL 60680 | Contingent | |
| | City State Zip Code | Unliquidated | |
| v | Who owes the debt? Check one. | Disputed | |
| [| Debtor 1 only | | |
| [| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | s the claim subject to offest? | | |
| | No | Other. Specify Debt Owed | |
| | Yes | . , | |

Page 26 of 67 Case Number (if known) **Document** Keith Carter Debtor 1

Your NONPRIORITY Unsecured Claims - Continuation Page

| After lis | sting any entries on this page, number them be | eginning with 4.4, followed by 4.5, and so forth. | Total Claim |
|---|---|---|--------------------|
| 4.13 | Comcast | Last 4 digits of account number | \$ <u>1,000.00</u> |
| | Creditor's Name | | |
| | 5330 E. 65th St. | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | | |
| | Indianapolis IN 46220 | Contingent | |
| | City State Zip Code | Unliquidated | |
| v | /ho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| ΙĒ | Debtor 1 and Debtor 2 only | Student loans | |
| l ř | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| 7 | Check if this claim relates to a | that you did not report as priority claims | |
| 4 | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ls | the claim subject to offest? | Bobble to periodic or profit orienting plants, and outer orininal debte | |
| | No | Other. Specify Utility Bills/Cellular Service | |
| Ī | Yes | Other. Specify | |
| 4.14 | Commonwealth Edison | Last 4 digits of account number | \$ 700.00 |
| 4.14 | Creditor's Name | | - |
| | 3 Lincoln Center 4th Floor | When was the debt incurred? | |
| | Number Street | | |
| | | As a false date were filler than a later to a Charlet Hills to a L | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Oakbrook Terrace IL 60181 | Contingent | |
| | City State Zip Code | Unliquidated | |
| v | /ho owes the debt? Check one. | Disputed | |
| ΙГ | Debtor 1 only | | |
| Ī | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| l ř | Debtor 1 and Debtor 2 only | Student loans | |
| F | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | | that you did not report as priority claims | |
| L | Check if this claim relates to a | Debts to pension or profit-sharing plans, and other similar debts | |
| le | community debt the claim subject to offest? | Debts to pension of profit-sharing plans, and other similar debts | |
| ľ | No | Out of the Hills/Collular Sorvice | |
| 7 | - | Other. Specify Utility Bills/Cellular Service | |
| 4.45 | Yes Credit ONE BANK N.A. | Last 4 digits of account number 2700 | \$ 938.00 |
| 4.15 | Creditor's Name | Last 4 digits of account number | |
| | Po Box 10497 | When was the debt incurred? 2013-2013 | |
| | Number Street | | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | O | Contingent | |
| | Greenville SC 29603 | Unliquidated | |
| v | City State Zip Code /ho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | _ | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | | | |
| Debtor 1 and Debtor 2 only Student loans | | | |
| 1 <u>L</u> | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| [| Check if this claim relates to a | that you did not report as priority claims | |
| . | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | s the claim subject to offest? | | |
| | No Vec | Other. Specify Unknown Credit Extension | |

Schedule E/F: Creditors Who Have Unsecured Claims

Case 16-29661 Doc 1 Filed 09/17/16 Entered 09/17/16 09:41:50 Desc Main Page 27 of 67 Number (if known) **Bocument** Keith Carter Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page

| After lis | sting any entries on this page, number them be | ginning with 4.4, followed by 4.5, an | d so forth. | Total Claim |
|---|--|---|-------------------------------|------------------|
| 4.16 | Credit ONE BANK NA | Last 4 digits of account number | NULL | \$ <u>0.00</u> |
| | Creditor's Name | Miles and the state of the same of O | 2012-2013 | |
| | Po Box 98875 | When was the debt incurred? | 2012 2010 | |
| | Number Street | | | |
| | | As of the date you file, the claim is: | Check all that apply. | |
| | Las Vegas NV 89193 | Contingent | | |
| | City State Zip Code | Unliquidated | | |
| W | /ho owes the debt? Check one. | Disputed | | |
| [| Debtor 1 only | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured of | claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | | |
| | At least one of the debtors and another | Obligations arising out of a separation | on agreement or divorce | |
| ΙĒ | Check if this claim relates to a | that you did not report as priority cla | ims | |
| - | community debt | Debts to pension or profit-sharing pl | lans, and other similar debts | |
| Is | s the claim subject to offest? | | | |
| | No | Other. Specify Credit Card or C | Credit Use | |
| | Yes Creditors Collection B | Land Authorities of a second | 5901 | \$ 59.00 |
| 4.17 | | Last 4 digits of account number | | \$ 39.00 |
| | Creditor's Name 755 Almar Pkwy | When was the debt incurred? | 2016-2016 | |
| | Number Street | | | |
| | . Tallipoi | | | |
| | | As of the date you file, the claim is: | Check all that apply. | |
| | Bourbonnais IL 60914 | Contingent | | |
| | City State Zip Code | Unliquidated | | |
| <u> </u> | /ho owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | | | |
| [| Debtor 2 only | Type of NONPRIORITY unsecured of | claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | | |
| | At least one of the debtors and another | Obligations arising out of a separation | on agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority cla | ims | |
| | community debt | Debts to pension or profit-sharing pl | ans, and other similar debts | |
| Is | s the claim subject to offest? | <u></u> | | |
| | ■ No ¬ | Other. Specify Medical Debt | | |
| 4.40 | Yes Creditors Discount & A | Last 4 digits of account number | 9024 | \$ 352.00 |
| 4.18 | Creditor's Name | Last 4 digits of account number | | <u> </u> |
| | 415 E Main St | When was the debt incurred? | 2011-2012 | |
| | Number Street | | | |
| | | As of the date you file, the claim is: | Cheek all that apply | |
| | | Contingent | Спеск ан шат арріу. | |
| | Streator IL 61364 | = ' | | |
| | City State Zip Code | Unliquidated | | |
| <u> </u> | /ho owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | | | |
| l L | Debtor 2 only | Type of NONPRIORITY unsecured of | claim: | |
| [| Debtor 1 and Debtor 2 only | Student loans | | |
| At least one of the debtors and another | | | | |
| [| Check if this claim relates to a | that you did not report as priority cla | | |
| | community debt | Debts to pension or profit-sharing pl | lans, and other similar debts | |
| | s the claim subject to offest? | Madical Date | | |
| | Yes | Other. Specify Medical Debt | | |
| | 100 | | | |

| | | Case 16-29661 | Doc 1 | Filed 09/17/16 | Entered 09/17/16 09:41:50 | Desc Main |
|----------|------------|-----------------------------|----------------|-----------------|--------------------------------------|-----------|
| Debtor 1 | Keith | Carter | | Document | Page 28 of 67 Case Number (if known) | |
| | First Name | Middle Name | | Last Name | | |
| Part 2: | You | r NONPRIORITY Unsecured Cla | ims - Continua | tion Page | | |

| After lis | sting any entries on this page, number them be | eginning with 4.4, followed by 4.5, and so forth. | Total Claim | | | |
|-----------|--|---|--------------------|--|--|--|
| 4.19 | Emergency Room Care Providers | Last 4 digits of account number | \$ <u>205.00</u> | | | |
| | Creditor's Name | | | | | |
| | Dept 4034 PO 3065 630-8751500 | When was the debt incurred? | | | | |
| | Number Street | | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | |
| | | Contingent | | | | |
| | Oak Brook IL 60522 | Unliquidated | | | | |
| ١ , | City State Zip Code Vho owes the debt? Check one. | Disputed | | | | |
| Ϊ́ | Debtor 1 only | | | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | |
| F | Debtor 1 and Debtor 2 only | Student loans | | | | |
| F | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | |
| | | that you did not report as priority claims | | | | |
| L | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| Is | s the claim subject to offest? | social to position of profit sharing plane, and out of officer and out of | | | | |
| | No | Other. Specify Medical/Dental Services | | | | |
| | Yes | | | | | |
| 4.20 | First Financial Asset Mgmt Inc | Last 4 digits of account number | <u>\$ 2,705.00</u> | | | |
| | Creditor's Name | | | | | |
| | PO Box 56245 | When was the debt incurred? | | | | |
| | Number Street | | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | |
| | Atlanta | Contingent | | | | |
| | Atlanta GA 30343 City State Zip Code | Unliquidated | | | | |
| _ v | City State Zip Code Vho owes the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | | | | | |
| Ī | Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | |
| Ī | Debtor 1 and Debtor 2 only | Student loans | | | | |
| Ī | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | |
| l ř | Check if this claim relates to a | that you did not report as priority claims | | | | |
| - | community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| Is | s the claim subject to offest? | | | | | |
| | No | Other. Specify Collecting for Creditor | | | | |
| \vdash | Yes | 0075 | * 205 00 | | | |
| 4.21 | First Premier BANK | Last 4 digits of account number 8075 | \$ <u>395.00</u> | | | |
| | Creditor's Name 2365 Northside Dr Ste 30 | When was the debt incurred? 2013-2013 | | | | |
| | Number Street | | | | | |
| | Namber Steek | | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | |
| | San Diego CA 92108 | Contingent | | | | |
| | City State Zip Code | Unliquidated | | | | |
| <u> </u> | Who owes the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | | | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 1 and Debtor 2 only | Student loans | | | | |
| [| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | |
| | Check if this claim relates to a | that you did not report as priority claims | | | | |
| . | community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | s the claim subject to offest? | | | | | |
| | No Tv | Other. Specify Unknown Credit Extension | | | | |
| | Yes | | | | | |

| Debtor 1 | Keith | Case 16-29661 | Doc 1 | Filed 09/17/16 Document | Entered 09/17/16 09:41:50 Page 29 of 67 Case Number (if known) | Desc Main | |
|--|------------|---------------|-------|------------------------------|--|-----------|--|
| | First Name | Middle Name | | Last Name | | | |
| Your NONPRIORITY Unsecured Claims - Continuation Page | | | | | | | |
| After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. | | | | | | | |
| 4.22 F | irst Prem | ier BANK | _ Las | t 4 digits of account number | NULL NULL | | |

| After li | sting any entries on this page, number them b | eginning with 4.4, followed by 4.5, a | nd so forth. | Total Claim |
|----------|--|--|--------------------------------|------------------|
| 4.22 | First Premier BANK | Last 4 digits of account number _ | NULL | \$ <u>427.00</u> |
| | Creditor's Name | | 2016 2016 | |
| | 601 S Minnesota Ave | When was the debt incurred? | 2016-2016 | |
| | Number Street | | | |
| | | As of the date you file, the claim is | : Check all that apply. | |
| | 0. 5.11 | Contingent | | |
| | Sioux Falls SD 57104 | Unliquidated | | |
| v | City State Zip Code Who owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | | |
| [| At least one of the debtors and another | Obligations arising out of a separar | tion agreement or divorce | |
| l i | Check if this claim relates to a | that you did not report as priority cl | aims | |
| ' | community debt | Debts to pension or profit-sharing p | plans, and other similar debts | |
| | s the claim subject to offest? | _ | | |
| | ■ No | Other. Specify Credit Card or | Credit Use | |
| 4.00 | Yes I C System INC | Look 4 digits of account number | 2001 | \$ 122.00 |
| 4.23 | Creditor's Name | Last 4 digits of account number _ | | Ψ22.00 |
| | Po Box 64378 | When was the debt incurred? | 2015-2015 | |
| | Number Street | | | |
| | | As of the date you file, the claim is | : Check all that apply | |
| | | Contingent | . Oncor all that apply. | |
| | Saint Paul MN 55164 | Unliquidated | | |
| Ι. | City State Zip Code | Disputed | | |
| ' | Who owes the debt? Check one. | | | |
| | Debtor 1 only | T (NONDDIODITY | alaba. | |
| | Debtor 2 only | Type of NONPRIORITY unsecured Student loans | claim: | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separa | tion agreement or diverse | |
| | At least one of the debtors and another | that you did not report as priority of | | |
| 1 | Check if this claim relates to a community debt | Debts to pension or profit-sharing | | |
| l I | s the claim subject to offest? | Bests to perision of profit sharing t | vario, and other similar dobte | |
| | No | Other. Specify Medical Debt | | |
| | Yes | | | |
| 4.24 | Illinois Lending | Last 4 digits of account number _ | | \$ <u>900.00</u> |
| | Creditor's Name | | | |
| | 724 W Washington Blvd | When was the debt incurred? | | |
| | Number Street | | | |
| | | As of the date you file, the claim is | : Check all that apply. | |
| | Chicago IL 60661 | Contingent | | |
| | City State Zip Code | Unliquidated | | |
| v | Who owes the debt? Check one. | Disputed | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured | claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | | |
| [| At least one of the debtors and another | Obligations arising out of a separa | ion agreement or divorce | |
| [| Check if this claim relates to a | that you did not report as priority cl | aims | |
| | community debt | Debts to pension or profit-sharing p | plans, and other similar debts | |
| | s the claim subject to offest? | _ | | |
| | No | Other. Specify PayDay Loan | | |
| | Yes | | | |

| Debtor 1 | Keith First Name Your | Case 16-29661 Carter Middle Name | | Last Name | Entered 09/17/16 09:41:50 Page 30 of 67 Case Number (if known) | Desc Main |
|--|-----------------------|------------------------------------|-------|------------------------------|--|-----------|
| After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. | | | | | | |
| 4.25 | M3 Financ | cial Services | _ Las | et 4 digits of account numbe | r <u>7374</u> | |

| After li | sting any entries on this page, number them be | eginning with 4.4, followed by 4.5, and | so forth. | Total Claim | | | |
|-----------|--|---|--|--------------------|--|--|--|
| 4.25 | M3 Financial Services | Last 4 digits of account number | 7374 | \$_7.00 | | | |
| | Creditor's Name | | 2040-2042 | | | | |
| | 10330 W Roosevelt Rd S-2 | When was the debt incurred? | 2012-2013 | | | | |
| | Number Street | | | | | | |
| | | As of the date you file, the claim is: C | heck all that apply. | | | | |
| | | Contingent | | | | | |
| | Westchester IL 60154 | Unliquidated | | | | | |
| v | City State Zip Code Vho owes the debt? Check one. | Disputed | | | | | |
| | Debtor 1 only | _ | | | | | |
| Ī | Debtor 2 only | Type of NONPRIORITY unsecured cla | im: | | | | |
| Ī | Debtor 1 and Debtor 2 only | Student loans | | | | | |
| Ī | At least one of the debtors and another | Obligations arising out of a separation | agreement or divorce | | | | |
| lī | Check if this claim relates to a | that you did not report as priority claim | s | | | | |
| " | community debt | Debts to pension or profit-sharing plan | s, and other similar debts | | | | |
| ls | s the claim subject to offest? | | | | | | |
| | No | Other. Specify Medical Debt | | | | | |
| | Yes Merchants Credit Guide | Look A distance of a | 3543 | \$ 86.00 | | | |
| 4.26 | Creditor's Name | Last 4 digits of account number | | \$ 80.00 | | | |
| | 223 W Jackson Blvd Ste 4 | When was the debt incurred? | 2014-2014 | | | | |
| | Number Street | | | | | | |
| | | As of the date you file, the claim is: C | thock all that apply | | | | |
| | | Contingent | песк ан шасарріу. | | | | |
| | Chicago IL 60606 | Unliquidated | | | | | |
| | City State Zip Code | Disputed | | | | | |
| \ \ \ \ \ | /ho owes the debt? Check one. | Бізраюч | | | | | |
| | Debtor 1 only | | | | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured cla | im: | | | | |
| | Debtor 1 and Debtor 2 only | Student loans | and the second s | | | | |
| | At least one of the debtors and another | Obligations arising out of a separation | | | | | |
| L | Check if this claim relates to a community debt | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| ls | s the claim subject to offest? | Debts to pension or profit-sharing plan | s, and other similar debts | | | | |
| | No | Other. Specify Medical Debt | | | | | |
| | Yes | | | | | | |
| 4.27 | Opportunity Financial | Last 4 digits of account number | · | \$ <u>2,100.00</u> | | | |
| | Creditor's Name | Miles and the shall be seen all 0 | | | | | |
| | 11 E. Adams St. | When was the debt incurred? | | | | | |
| | Number Street | | | | | | |
| | | As of the date you file, the claim is: C | heck all that apply. | | | | |
| | Chicago IL 60603 | Contingent | | | | | |
| | City State Zip Code | Unliquidated | | | | | |
| v | ho owes the debt? Check one. | Disputed | | | | | |
| | Debtor 1 only | | | | | | |
| [| Debtor 2 only | Type of NONPRIORITY unsecured cla | im: | | | | |
| [| Debtor 1 and Debtor 2 only | Student loans | | | | | |
| [| At least one of the debtors and another | Obligations arising out of a separation | - | | | | |
| [| Check if this claim relates to a | that you did not report as priority claim | | | | | |
| . | community debt | Debts to pension or profit-sharing plan | s, and other similar debts | | | | |
| | s the claim subject to offest? No | Day Day Lass | | | | | |
| | Yes | Other. Specify PayDay Loan | | | | | |
| | | | | | | | |

| Debtor 1 | Keith | Case 16-29661 | Doc 1 | | Entered 09/17/16 09:41:50 Page 31 of 67 Number (if known) | |
|-------------|------------|-----------------------------|-----------------|------------------------------|---|--|
| | First Name | Middle Name | | Last Name | , , | |
| Part 2 | You | r NONPRIORITY Unsecured Cla | aims - Continua | ation Page | | |
| After listi | ng any e | ntries on this page, number | them beginni | ng with 4.4, followed by 4.5 | s, and so forth. | |
| 4 28 F | RCN | | l ac | st 4 digits of account numbe | r 3001 | |

| After li | After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total Claim | | | | | |
|----------|---|--|--------------------|--|--|--|
| 4.28 | RCN | Last 4 digits of account number 3001 | \$ <u>517.00</u> | | | |
| | Creditor's Name | 2015 2015 | | | | |
| | Po Box 64378 | When was the debt incurred? 2015-2015 | | | | |
| | Number Street | | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | |
| | | Contingent | | | | |
| | Saint Paul MN 55164 | Unliquidated | | | | |
| v | City State Zip Code Vho owes the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | _ | | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | |
| li | Debtor 1 and Debtor 2 only | Student loans | | | | |
| li | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | |
| ř | Check if this claim relates to a | that you did not report as priority claims | | | | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| ls ls | s the claim subject to offest? | | | | | |
| | No | Other. Specify Collecting for Creditor | | | | |
| | Yes Diag Condit | | . 500.00 | | | |
| 4.29 | Rise Credit | Last 4 digits of account number | \$ <u>500.00</u> | | | |
| | Creditor's Name PO Box 101808 | When was the debt incurred? | | | | |
| | Number Street | when was the dept incurred? | | | | |
| | Number Street | | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | |
| | Fort Worth TX 76185 | Contingent | | | | |
| | City State Zip Code | Unliquidated | | | | |
| v | Who owes the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | | | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 1 and Debtor 2 only | Student loans | | | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | |
| | Check if this claim relates to a | that you did not report as priority claims | | | | |
| ١. | community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | s the claim subject to offest? | <u>_</u> | | | | |
| | No T., | Other. Specify | | | | |
| 4 20 | Yes Santander Consumer USA INC. | Last 4 digits of account number1000 | \$ 6,623.00 | | | |
| 4.30 | Creditor's Name | Last 4 digits of account number | <u> </u> | | | |
| | 1 Allied Dr | When was the debt incurred? 2015-2015 | | | | |
| | Number Street | | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | |
| | | Contingent | | | | |
| | Trevose PA 19053 | Unliquidated | | | | |
| ١,, | City State Zip Code | Disputed | | | | |
| ' | Vho owes the debt? Check one. | | | | | |
| | Debtor 1 only | | | | | |
| | Debtor 2 and Debtor 2 and | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 1 and Debtor 2 only | Student loans Obligations arising out of a separation agreement or divorce | | | | |
| | At least one of the debtors and another | that you did not report as priority claims | | | | |
| L | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| ls | s the claim subject to offest? | Social to period on professioning plane, and other similar debts | | | | |
| | No | Other. Specify Unknown Credit Extension | | | | |
| | Yes | | | | | |
| | | | | | | |

Case 16-29661 Filed 09/17/16 Entered 09/17/16 09:41:50 Desc Main Doc 1 Page 32 of 67 Case Number (if known) Document Keith Carter Debtor 1 First Name \$ 900.00 Zingo Cash 4.31 Last 4 digits of account number Creditor's Name 200 N. Fairway Dr. When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Vernon Hills Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offest? Other. Specify Payday List Others to Be Notified for a Debt That You Already Listed Part 3: 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Arnold Scott Harris PC On which entry in Part 1 or Part 2 list the original creditor? Name 111 W Jackson Blvd Ste 600 Line 11 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Number Street

Last 4 digits of account number _____

IL 60604

State Zip Code

Chicago

City

Debtor 1 Keith

Carter

Document

Page 33 of 67 (If known)

30,232.00

Name Middle Name

Add the Amounts for Each Type of Unsecured Claim

Last Name

| | | | Total claim |
|-----------------------------|---|-----|-------------|
| Total claims from Part 1 | 6a. Domestic support obligations | 6a. | \$0.0 |
| | 6b. Taxes and Certain other debts you owe the government | 6b. | \$6,150.0 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.0 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.0 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$6,150.0 |
| | | | Total claim |
| Total claims | 6f. Student loans | 6f. | \$0.0 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.0 |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.0 |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$30,232.0 |

6j. Total. Add lines 6f through 6i.

| | | Caso 16 1 | 20661 Doc 1 I | Filad 00/17/16 | Entered 09/17/16 09:41:50 | Desc Main |
|--|--|---|--|--|--|------------------------------------|
| Fill | in this inf | formation to identif | | | 4 of 67 | |
| Del | otor 1 | Keith | Carter | Broadney | | |
| | | First Name | Middle Name | Last Name Proodpov | | |
| | otor 2 use, if filing) | Deborah First Name | Ann Middle Name | Broadney | | |
| | | | | | | |
| Uni | ted States I | Bankruptcy Court for th | ne : <u>NORTHERN</u> District of _ | ILLINOIS (State) | | Charle if this is an |
| | se Number (nown) | | | _ | | Check if this is an amended filing |
| | | orm 106G | | | | amended ming |
| | | | ry Contracts and | llnevnired l ee | | 12/1 |
| Be as on the second sec | complete ation. If m anal pages you have No. Che | and accurate as po nore space is neede s, write your name a e any executory co eck this box and sub | ossible. If two married people ed, copy the additional page and case number (if known). ntracts or unexpired leases omit this form to the court with | e are filing together, both fill it out, number the en | h are equally responsible for supplying correct ntries, and attach it to this page. On the top of an ou have nothing else to report on this form. Schedule A/B: Property (Official Form 106A/B) | ny |
| ex un | st separate ample, rel expired le | ely each person or nt, vehicle lease, ce ases. | company with whom you ha | ive the contract or lease as for this form in the insti | Then state what each contract or lease is for (fruction booklet for more examples of executory co | ntracts and |
| 2.1 | | | | | | |
| 2.1 | Name | | | | - | |
| | | | | | _ | |
| | Number | Street | | | | |
| | City | | State Zip | Code | - | |
| 2.2 | | | | | | |
| 2.2 | Name | | | | - | |
| | | | | | _ | |
| | Number | Street | | | | |
| | City | | State Zip | Code | - | |
| 2.3 | | | | | | |
| | Name | | | | | |
| | Number | Street | | | - | |
| | Number | Street | | | | |
| | City | | State Zip | Code | - | |
| 2.4 | | | | | | |
| 2.4 | Name | | | | - | |
| | | | | | - | |
| | Number | Street | | | | |
| | City | | State Zip | Code | - | |
| 2.5 | | | | | | |
| | Name | | | | - | |
| | | | | | - | |
| | Number | Street | | | | |

Schedule G. Executory Contracts and Unexpired Leases

State Zip Code

City

Official Form 106G

| Fill in this in | formation to identi | fy your case: | |
|---------------------|------------------------|---|-----------|
| Debtor 1 | Keith | Carter | Broadney |
| | First Name | Middle Name | Last Name |
| Debtor 2 | Deborah | Ann | Broadney |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for t | the : <u>NORTHERN</u> District of <u>IL</u> | LINOIS_ |
| Case Number | r | | (State) |
| (If known) | | | • |

12/15

Official Form 106H

Schedule H: Your Codebtors

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| ally A | any Additional Pages, write your name and case number (it known). Answer every question. | | | | | | | |
|-------------|--|--------------------------------------|---|---------------|---|--|--|--|
| 1. I | Do you | have any codebtors? (If you | are filing a joint case, do not list either sp | oouse as a co | debtor.) | | | |
| | No. | | | | | | | |
| [| Yes | 3 | | | | | | |
| | 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Lousiiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) | | | | | | | |
| | No. Go to line 3. | | | | | | | |
| [| Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? | | | | | | | |
| | F | No Yes Inwhich community state | te or territory did you live? | Fi | I in the name and current address of that person. | | | |
| | | 1 · 00 | | | | | | |
| | | Name of your spouse, former spouse o | r legal equivalent | | | | | |
| | | Number Street | | | | | | |
| | | City | State | Zip Code | | | | |
| | | | • • | - | r spouse is filing with you. List the person | | | |
| | | = | only if that person is a guarantor or co hedule E/F (Official Form 106E/F), or S | _ | | | | |
| | | ule E/F, or Schedule G to fill o | | , | , | | | |
| | Colur | mn 1: Your codebtor | | | Column 2: The creditor to whom you owe the debt | | | |
| | | | | | Check all schedules that apply: | | | |
| 3.1 | | | | | Schedule D, line | | | |
| | Name | е | | | Schedule E/F, line | | | |
| | Num | ber Street | | | Schedule G, line | | | |
| | City | | State | Zip Code | | | | |
| 3.2 | | | | | Schedule D, line | | | |
| | Name | e | | | Schedule E/F, line | | | |
| | Num | ber Street | | | Schedule G, line | | | |
| | City | | State | Zip Code | | | | |
| 3.3 | | | | | Schedule D, line | | | |
| | Name | e | | | Schedule E/F, line | | | |
| | Num | ber Street | | | Schedule G, line | | | |
| | City | | State | Zip Code | | | | |

| Fill in this information to identify your case: | | | | | | | |
|---|------------|-------------|-----------|--|--|--|--|
| Debtor 1 | Keith | Carter | Broadney | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | Deborah | Ann | Broadney | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the : <u>NORTHERN DISTRICT OF ILLINOIS</u> Case Number | | | | | | | |
| (If known) | | | | | | | |
| | | | | | | | |

| Che | ck if this is: |
|-----|---|
| | An amended filing |
| | A supplement showing post-petition |
| | chapter 13 income as of the following date: |
| | |
| | MM / DD / YYYY |

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Describe Employ | ment | | | |
|---|--|---|--------------|-----------------------------------|
| Fill in your employment information | | Debtor 1 | | Debtor 2 or non-filling spouse |
| If you have more than on- attach a separate page w information about addition employers. | ith Employment status | X Employed Not employed | | Employed X Not employed |
| Include part-time, season self-employed work. | al, or Occupation | Director | | |
| Occupation may Include sor homemaker, if it applie | S. Employers name | Senior Lifestyle C | | |
| | Employers address | 303 E. Wacker Dr., Chicago, IL 60601 | Ste. 2400 | |
| | How long employed there? | 5 years | | |
| Part 2: Give Details Abo | ut Monthly Income | | | |
| spouse unless you are se | he as of the date you file this form. If you he parated. Douse have more than one employer, comb nore space, attach a separate sheet to this | oine the information for a | • | |
| | | | For Debtor 1 | For Debtor 2 or non-filing spouse |
| | es, salary and commissions (before all pa nonthly, calculate what the monthly wage w | • | \$4,161.73 | \$0.00 |
| 3. Estimate and list month | aly overtime pay. | | \$0.00 | \$0.00 |
| 4. Calculate gross income | a. Add line 2 + line 3. | | \$4,161.73 | \$0.00 |

 Official Form 106I
 Record # 718038
 Schedule I: Your Income
 Page 1 of 2

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Debtor 1 Keith Carter Document Broadney Page 37 of 67 Case Number (if known) _____

| | | First Name Middle Name Last Name | | For Debtor 1 | For Debtor 2 or non-filing spouse | |
|-------------|-------------------|--|----------------------|---------------------------|-----------------------------------|------------|
| | Сор | y line 4 here | 4. | \$4,161.73 | \$0.00 | |
| 5. L | | payroll deductions: | | | | |
| | | Tax, Medicare, and Social Security deductions | 5a. | \$861.01 | \$0.00 | |
| | | Mandatory contributions for retirement plans | 5b. | \$0.00 | \$0.00 | |
| | | Voluntary contributions for retirement plans | 5c. | \$0.00 | \$0.00 | |
| | | Required repayments of retirement fund loans . | 5d. | \$0.00 | \$0.00 | |
| | | Insurance Domestic support obligations | 5e. 5f. | \$294.60 | \$0.00 | |
| | | Union dues | | \$0.00 | \$0.00 \$0.00 | |
| | _ | | 5g. | \$0.00 | · | |
| 6 4 | | Other deductions. Specify: | 5h. 6. | \$108.55 \$1,264.16 | \$0.00 | |
| | | ate total monthly take-home pay. Subtract line 6 from line 4. | 7. [| \$1,264.16 | \$0.00 | |
| | | other income regularly received: | ′·L | \$2,897.57 | \$0.00 | |
| 0. L | 8a. | | | | | |
| | oa. | profession, or farm | | | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | |
| | | monthly net income. | 8a. | \$0.00 | \$0.00 | |
| | 8b. | Interest and dividends | 8b. | \$0.00 | \$0.00 | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive | 8c. | \$ 0.00 | \$ 0.00 | |
| | | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | ee | | | |
| | 8d. | Unemployment compensation | 8d. | \$0.00 | \$1,174.09 | |
| | 8e. | Social Security | 8e. | \$0.00 | \$0.00 | |
| | 8f. | Other government assistance that you regularly receive | | \$0.00 | \$0.00 | |
| | | Include cash assistance and the value (if known) of any non-cash | - | φσ.σσ | Ψ0.00 | |
| | | assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | ; | | | |
| | 8g. | Pension or retirement income | 8g. | \$0.00 | \$0.00 | |
| | 8h. | Other monthly income. Specify: | 8h. | \$0.00 | \$0.00 | |
| 9. | Add | all other income . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$0.00 | \$1,174.09 | |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$2,897.57 + | \$1,174.09 | \$4,071.66 |
| 11. | Incluothe Do n | te all other regular contributions to the expenses that you list in Schude contributions from an unmarried partner, members of your househer friends or relatives. not include any amounts already included in lines 2-10 or amounts that cify: | old, your depende | to pay expenses listed in | | \$0.00 |
| 12. | Add | the amount in the last column of line 10 to the amount in line 11. Te that amount on the Summary of Schedules and Statistical Summary | he result is the cor | mbined monthly income. | _ | \$4,071.66 |
| 13. | х | ou expect an increase or decrease within the year after you file this No. Yes. Explain: | s form? | | | |

| Fill in this i | nformation to identify yo | ur case: | | | | |
|--------------------------|---|--|------------------------------|--|---|---------------------------|
| Debtor 1 | Keith | Carter | Broadney | Check if this is: | | |
| | First Name | Middle Name | Last Name | An amend | ed filing | |
| Debtor 2 | Deborah | Ann | Broadney | A supplem | nent showing pos | t-petition chapter 13 |
| (Spouse, if filing) | First Name | Middle Name | Last Name | income as | of the following of | date: |
| United States | s Bankruptcy Court for the : _ | NORTHERN DISTRICT C | F ILLINOIS | | | |
| Case Numbe (If known) | er | | _ | MM / DD / | TTTT | |
| Official F | orm 106J | | | | e filing for Debtor a separate house | 2 because Debtor 2 ehold. |
| Schedu | le J: Your Exp | enses | | | | 12/14 |
| | · · · · · · · · · · · · · · · · · · · | | | are equally responsible for supply ges, write your name and case nu | _ | |
| Part 1: | Describe Your Household | | | | | |
| | Go to line 2. Does Debtor 2 live in a s X No. | eparate household? t file a separate Schedu | e J. | | | |
| 2. Do you | have dependents? | X No | | Dependent's relationship to | Dependent's | Does dependent live |
| | ist Debtor 1 and | | this information for | Debtor 1 or Debtor 2 | age | with you? |
| Debtor 2 | 2. | each depen | dent | | | |
| Do not s | state the dependents' | | | | | Yes |
| manies. | | | | | | X No |
| | | | | | | Yes |
| | | | | | | X No |
| | | | | | | Yes |
| | | | | | | x _{No} |
| | | | | | | Yes |
| | | | | | | x No |
| | | | | | | |
| 2 Da waw | a ayyaanaa inaliida | | | | | Yes |
| _ | expenses include es of people other than | X No | | | | |
| yoursel | f and your dependents? | Yes | | | | |
| Part 2: | Estimate Your Ongoing Mo | nthly Expenses | | | | |
| Estimate your | expenses as of your ba | nkruptcy filing date un | ess you are using this forn | n as a supplement in a Chapter 13 | case to report | |
| expenses as of | | ptcy is filed. If this is a | supplemental Schedule J, | check the box at the top of the for | rm and fill in | |
| | = | _ | nce if you know the value | | | |
| of such assis | tance and have included | it on Schedule I: Your | Income (Official Form 106I. | .) | | Your expenses |
| 4. The ren | tal or home ownership e | xpenses for your resid | ence. Include first mortgage | e payments and | | |
| any ren | t for the ground or lot. | | | | 4. | \$1,450.00 |
| If not in | cluded in line 4: | | | | | |
| 4a. R | eal estate taxes | | | | 4a. | \$0.00 |
| 4b. Pr | roperty, homeowner's, or r | enter's insurance | | | 4b. | \$0.00 |
| | ome maintenance, repair, | | | | 4c. | \$50.00 |
| 4d. Ho | omeowner's association o | r condominium dues | | | 4d. | \$0.00 |

Schedule J: Your Expenses

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Last Name

Carter Keith

Middle Name

Debtor 1

First Name

Case Number (if known) _

| | | | Your expens | es |
|------------------|---|------|-------------|----------|
| 5. Addi | tional Mortgage payments for your residence, such as home equity loans | 5. | | \$0.00 |
| 6. Utilit | ies: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | | \$325.00 |
| 6b. | Water, sewer, garbage collection | 6b. | | \$0.00 |
| 6c. | Telephone, cell phone, internet, satellite, and cable service | 6c. | | \$475.00 |
| 6d. | Other. Specify: | 6d. | \$ | 0.00 |
| 7. Food | and housekeeping supplies | 7. | | \$397.00 |
| 3. Chile | Icare and children's education costs | 8. | | \$0.00 |
| . Cloti | ning, laundry, and dry cleaning | 9. | | \$125.00 |
| 0. Pers | onal care products and services | 10. | | \$105.00 |
| 1. Medi | cal and dental expenses | 11. | | \$75.00 |
| 12. Tran | sportation. Include gas, maintenance, bus or train fare. | 12. | | \$323.88 |
| Do n | ot include car payments. | | | |
| 3. Ente | rtainment, clubs, recreation, newspapers, magazines, and books | 13. | | \$0.00 |
| 4. Char | itable contributions and religious donations | 14. | | \$0.00 |
| 5. Insu | rance. | | | |
| Do n | ot include insurance deducted from your pay or included in lines 4 or 20. | | | |
| 15a. | Life insurance | 15a. | | \$0.0 |
| 15b. | Health insurance | 15b. | | \$0.0 |
| 15c. | Vehicle insurance | 15c. | | \$175.0 |
| 15d. | Other insurance. Specify: | 15d. | | \$0.0 |
| 6. Taxe | s. Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| Spec | ify: | 16. | | \$0.0 |
| 7. Insta | Ilment or lease payments: | | | |
| 17a. | Car payments for Vehicle 1 | 17a. | | \$0.0 |
| 17b. | Car payments for Vehicle 2 | 17b. | | \$0.00 |
| 17c. | Other. Specify: | 17c. | | \$0.00 |
| 17d. | Other. Specify: | 17d. | | \$0.00 |
| 8. You r | payments of alimony, maintenance, and support that you did not report as deducted | | | |
| from | your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | | \$0.00 |
| 9. Othe | r payments you make to support others who do not live with you. | | | |
| Spec | ify: | 19. | | \$0.00 |
| 0. Othe | r real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | | | |
| 20a. | Mortgages on other property | 20a. | | \$ 0.00 |
| | Real estate taxes | 20b. | \$ | 0.00 |
| 20b. | Property, homeowner's, or renter's insurance | 20c. | \$ | 0.0 |
| | Froperty, nomeowners, or renters insurance | | | |
| 20c. | Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |

Official Form 106J Record # 718038 Schedule J: Your Expenses Page 2 of 3 Case 16-29661 Doc 1 Filed 09/17/16 Entered 09/17/16 09:41:50 Desc Main Document Page 40 of 67

Keith Carter Debtor 1 Case Number (if known) _ First Name Middle Name Last Name \$55.00 21. Other. Specify: ___Pet Care (\$50.00), Postage/Bank Fees (\$5.00), 21. \$3,555.88 22.. Your monthly expense: Add lines 4 through 21. 22. The result is your monthly expenses. 23. Calculate your monthly net income. \$4,071.66 23a. 23a. Copy line 12 (your comibined monthly income) from Schedule I. \$3,555.88 23b. Copy your monthly expenses from line 22 above. 23b.-\$515.78 23c. Subtract your monthly expenses from your monthly income. 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? X No Explain Here: Yes.

Official Form 106J Record # 718038 Schedule J: Your Expenses Page 3 of 3

| Fill in this in | formation to ident | ify your case: | | | | | |
|---------------------------|--|----------------|-----------|--|--|--|--|
| Debtor 1 | Keith | Carter | Broadney | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | Deborah | Ann | Broadney | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States | United States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> (State) | | | | | | |
| Case Number (If known) | - | | | | | | |
| | | | | | | | |

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|--|---|
| Did you pay or agree to pay someone who is NOT an attorney to he | elp you fill out bankruptcy forms? |
| Yes. Name of Person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| Under penalty of perjury, I declare that I have read the summary an correct. | d schedules filed with this declaration and that they are true and |
| | |
| ✗ /s/ Keith Carter Broadney | /s/ Deborah Ann Broadney |
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date 09/16/2016 MM / DD / YYYY | Date09/16/2016 |
| | |

Case 16-29661 Doc 1 Filed 09/17/16 Entered 09/17/16 09:41:50 Desc Main

| Fill in this in | formation to identi | ify your case: | |
|---------------------|----------------------|-------------------------------------|-------------|
| | | | |
| Debtor 1 | Keith | Carter | Broadney |
| | First Name | Middle Name | Last Name |
| Debtor 2 | Deborah | Ann | Broadney |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United Otatas | Darahan Canada | AL NODTHEDN District of | II LINOIC |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ | (State) |
| Case Number | 「 <u></u> | | |
| (If known) | | | |
| | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

is an

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| lullibei | (ii kilowii). Aliswei every question. | | | |
|----------------|--|----------------------------|---------------------------------------|------------------|
| Part ' | Give Details About Your Marital Status and Wh | ere You Lived Before | | |
| 01. W h | nat is your current marital status? | | | |
| | _ | | | |
| | Married Not married | | | |
| | Not married | | | |
| 02 D u | ring the last 3 years, have you lived anywhere oth | er than where you live no | w? | |
| | No. | or than whore you had no | | |
| | Yes. List all of the places you lived in the last 3 year | rs. Do not include where | ou live now. | |
| | | | | |
| | Debtor 1 | Dates Debtor 1 | Debtor 2: | Dates Debtor 2 |
| | | lived there | Same as Debtor 1 | lived there |
| | 107 F 40Nd Ct | FDOM 04/2012 | Same as Debior 1 | Same as Debtor 1 |
| | 107 E 42Nd St Chicago IL 60653-4697 | FROM 01/2012 To 08/2016 | | |
| | Cilicago IL 00033-4097 | 10 00/2010 | | |
| | | | | |
| | | | | |
| pro and | thin the last 8 years, did you ever live with a spous operty states and territories include Arizona, Califo d Wisconsin.) No. Yes. Make sure you fill out Schedule H: Your Codel | ornia, Idaho, Louisiana, N | evada, New Mexico, Puerto Rico, Texas | |
| | | | | |
| Part : | Explain the Sources of Your Income | | | |
| | | | | _ |
| | | | | |
| | | | | |
| | | | | |
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Debtor 1 Keith Carter Broadney Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$ 34,500 \$ 20,249 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$ 47,444 \$ 27,460 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business Wages, commissions, \$ 32,577 Wages, commissions, \$ 27,985 For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2014) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

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| ebtor | 1 Keith | Carter | Broadney | | Case Number (if known) | |
|-------|---|-------------------------------|------------------------|-----------------------------|-----------------------------|---|
| | First Name | Middle Name | Last Name | | | |
| 06 | Are either Debtor 1's or De | btor 2's debts primarily co | nsumer debts? | | | |
| _ | _ | | | | | |
| [| | or Debtor 2 has primarily c | | | ined in 11 U.S.C. § 101(8) | as |
| | - | vidual primarily for a persor | - | | 005* | |
| | During the 90 days | before you filed for bankrup | otcy, did you pay ar | ny creditor a total of \$6, | 225° or more? | |
| | ☐ No. Go to line | 7. | | | | |
| | □ Ves List below | each creditor to whom you | upaid a total of \$6.0 | 225* or more in one or | more payments and the | |
| | | ou paid that creditor. Do not | • | | | |
| | - | nd alimony. Also, do not inc | | • • | - | |
| | * * | on 4/01/16 and every 3 year | | - | | |
| | | | | | | |
| | _ | or 2 or both have primarily | | | | |
| | During the 90 day | s before you filed for bankru | uptcy, did you pay a | any creditor a total of \$6 | 600 or more? | |
| | No. Go to line | 7. | | | | |
| | Yes. List below | each creditor to whom you | ı paid a total of \$60 | 0 or more and the total | amount you paid that | |
| | creditor. Do no | t include payments for dom | estic support obliga | ations, such as child su | pport and | |
| | alimony. Also, | do not include payments to | an attorney for this | bankruptcy case. | | |
| | | | | | | |
| | | | Dates of | Total amount paid | Amount you still | owe Was this payment for |
| | | | payments | | | |
| | | | | | | |
| | GM Financ | ial Po Box 181145 | Monthly | \$ 406 | \$ 16,060 | Mortgage |
| | Arlington T | X 76096 | | | | Car |
| | | | | | | Credit card |
| | | | | | | ☐ Loan repayment ☐ Suppliers or vendors |
| | | | | | | Other |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 07 \ | Within 1 year before you file | d for bankruptcy, did you m | ake a payment on | a debt vou owed anvor | ne who was an insider? | |
| - 1 | nsiders include your relative | es; any general partners; rel | latives of any gene | ral partners; partnershi | ps of which you are a gene | |
| | corporations of which you ar agent, including one for a bu | | | | - | |
| | such as child support and al | | propriotori i i o. | 0.0.3 .0o.aao pa | ,o.no ioi doilloche dappe | it ozngatone, |
| | No. | | | | | |
| i | Yes. List all payments to | an insider. | | | | |
| | | | Dates of | Total amount | Amount you still | Reason for this payment |
| | | | payment | paid | owe | |
| 08 \ | Vithin 1 year before you file | d for hankruntey, did you m | ake any navments | or transfer any propert | y on account of a debt that | hanafitad |
| - | an insider? | a for bankruptcy, ala you fir | ake any payments | or transfer any propert | y on account of a debt that | benented |
| I | nclude payments on debts | guaranteed or cosigned by | an insider. | | | |
| | No. | | | | | |
| [| Yes. List all payments to | an insider. | | | | |
| | | | Dates of | Total amount | Amount you still | Reason for this payment |
| | | | payment | paid | owe | Include creditor's name |
| Pa | Identify Legal action | ns, Repossessions, and Fore | eclosures | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| ebto | r 1 | Keith Carter | | Broadney | Case Number (if | known) | |
|------|-----------------|---|--------------|--|--|--------------------------|---|
| | | First Name Middle Name | e | Last Name | | | |
| 09 | List a | nin 1 year before you filed for bankrupt all such matters, including personal inj difications, and contract disputes. | | | | | |
| | _ | No. | | | | | |
| | □ <i>i</i> | Yes. Fill in the details. | | | _ | | |
| 10 | | nin 1 year before you filed for bankrupt ock all that apply and fill in the details b | cy, was any | Nature of the case of your property repossesse | Court or agency ed, foreclosed, garnished, attached | , seized, or levied? | Status of the case |
| | 1 | No. Go to line 11 | | | | | |
| | | Yes. Fill in the information below. | | | | | |
| 11 | | nin 90 days before you filed for bankr efuse to make a payment because yo | | - | nk or financial institution, set off | any amounts from y | our accounts |
| | ١ | No. Go to line 11 | | | | | |
| | | Yes. Fill in the information below. | | | | | |
| | cour | nin 1 year before you filed for bankru nt-appointed receiver, a custodian, or | | | ossession of an assignee for the | benefit of creditors, | a |
| | ΠY | √o. ∕es. | | | | | |
| | | = | | | | | |
| | arti-5∄ With | List Certain Gifts and Contribution in 2 years before you filed for bankr | | ou give any gifts with a tot | al value of more than \$600 per pe | reon? | |
| | _ | | upicy, ala y | ou give any gins with a tot | ai value of more than 4000 per pe | 15011 ! | |
| | | | | | | | |
| 14 | _ | Yes. Fill in the details for each gift. nin 2 years before you filed for bankr | untey did v | ou give any gifts or contrib | outions with a total value of more | than \$600 to any ch | arity? |
| | | - | upicy, did y | ou give any gins or continu | dutions with a total value of more | than \$000 to any ch | arity: |
| | I | | | | | | |
| | П, | Yes. Fill in the details for each gift. | | | | | |
| Pa | art 6: | List Certain Losses | | | | | |
| 15 | | nin 1 year before you filed for bankru nbling? | ptcy or sinc | e you filed for bankruptcy, | did you lose anything because o | f theft, fire, other dis | aster, or |
| | ١ | No. | | | | | |
| | | Yes. Fill in the details for each gift. | | | | | |
| | | = | | | | | |
| P | art 7: | List Certain Payments or Transfer | s | | | | |
| 16 | cons | nin 1 year before you filed for bankru sulted about seeking bankruptcy or p ude any attorneys, bankruptcy petitic | preparing a | bankruptcy petition? | | | ou |
| | П١ | No. | | | | | |
| | = | Yes. Fill in the details | | | | | |
| | P | Party Contact Info | | Description and value of | any property transferred | Date payment or transfer | Amount of payment |
| | | Geraci Law L.L.C. | | | | 2016 | Payment/Value: |
| | | 55 E. Monroe Street #3400 | | | | | \$4,000.00: \$0.00 paid prior to filing, |
| | | Chicago,IL 60603 | | | | | balance to be paid through the plan. |
| | | | | | | | an ang mana prami |
| | | | | | | | |
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Case 16-29661 Doc 1 Filed 09/17/16 Entered 09/17/16 09:41:50 Desc Main Page 46 of 67 Document Keith Carter Broadney Case Number (if known) Debtor 1 First Name Middle Name Last Name **Party Contact Info** Description and value of any property transferred Date payment Amount of payment or transfer Credit Counseling Services Hananwill Credit Counseling 2016 \$25.00 115 N. Cross St Robinson, IL 62454 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Yes. Fill in the details. 18 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details for each gift. 19 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details for each gift. List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before closed, sold, moved, instrument closing or transfer or transferred Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No. Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? 22 Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still **Identify Property You Hold or Control for Someone Else**

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| Debtor | 1 Keith | Carter | Broadney | Case Number (if known) | |
|-------------|------------------------------|---|--|---|--------------------|
| | First Name | Middle Name | Last Name | | |
| | Do you hold o or someone. | r control any property that so | meone else owns? Include any property | you borrowed from, are storing for, or ho | ld in trust |
| | No. | | | | |
| [| Yes. Fill in | the details. | | | |
| | | | Where is the property? | Describe the property | Value |
| Pari | Give I | Details About Environmental Info | ormation | | |
| For ti | he purpose of | f Part 10, the following definiti | ons apply: | | |
| h | azardous or t | oxic substances, wastes, or n | or local statute or regulation concerning naterial into the air, land, soil, surface wa the cleanup of these substances, waste | iter, groundwater, or other medium, | |
| | - | y location, facility, or property wn, operate, or utilize it, includ | - | v, whether you now own, operate, or utilize | • |
| | | terial means anything an envi zardous material, pollutant, co | ronmental law defines as a hazardous w ontaminant, or similar term. | aste, hazardous substance, toxic | |
| Repo | ort all notices, | releases, and proceedings th | at you know about, regardless of when t | hey occurred. | |
| 24 F | las any gove | rnmental unit notified you tha | t you may be liable or potentially liable u | nder or in violation of an environmental la | w? |
| l | No. | | | | |
| [| Yes. Fill in | the details. | | | |
| | | | Governmental unit | Environmental law, if you know it | Date of notice |
| 25 F | Have you noti | fied any governmental unit of | any release of hazardous material? | | |
| l i | No. | | | | |
| [| Yes. Fill in | the details. | | | |
| | | | Governmental unit | Environmental law, if you know it | Date of notice |
| 26 F | lave you bee | n a party in any judicial or adr | ninistrative proceeding under any enviro | onmental law? Include settlements and ord | lers. |
| | No. | | · · · · · · | | |
| ; | | the details. | | | |
| ļ ' | _ | | Court or agency | Nature of the case | Status of the case |
| | | | | | |
| Part | Give C | Details About Your Business or C | Connections to Any Business | | |
| 27 V | Within 4 years | before you filed for bankrupt | cy, did you own a business or have any | of the following connections to any busin | ess? |
| | A sole | proprietor or self-employed in | a trade, profession, or other activity, ei | ther full-time or part-time | |
| | A mem | ber of a limited liability compa | any (LLC) or limited liability partnership | (LLP) | |
| | = | ner in a partnership | | | |
| | _ | cer, director, or managing exe | | | |
| | ∐An owr | ner of at least 5% of the voting | or equity securities of a corporation | | |
| | No. None | of the above applies. Go to Pa | rt 12. | | |
| | Yes. Chec | k all that apply above and fill in | the details below for each business. | | |
| | - | s before you filed for bankrupt reditors, or other parties. | cy, did you give a financial statement to | anyone about your business? Include all | financial |
| l i | No. | | | | |
| | Yes. Fill in | the details. | | | |
| | | | Date issued | | |
| | | | | | |
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 Eebtor 1
 Keith
 Carter
 Broadney
 Case Number (if known)

 First Name
 Middle Name
 Last Name

| Sign Below | | | | | | | |
|--|--|--|--|--|--|--|--|
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | | | |
| ✗ /s/ Keith Carter Broadney 🗶 | /s/ Deborah Ann Broadney | | | | | | |
| Signature of Debtor 1 | Signature of Debtor 2 | | | | | | |
| Date 09/16/2016 MM / DD / YYYY | Date 09/16/2016 MM / DD / YYYY | | | | | | |
| Did you attach additional pages to Your Statement of Financial Affairs | for Individuals Filing for Bankruptcy (Official Form 107)? | | | | | | |
| No | | | | | | | |
| Yes | | | | | | | |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? | | | | | | | |
| No | | | | | | | |
| Yes. Name of person | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | | |
| | | | | | | | |

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

| In r | ·e | | | | | | | | | |
|------|--|------------|--------------------|--------------------------------------|---|--|--|--------------------------|---|-----------|
| Kei | Keith Carter Broadney and Deborah Ann Broadney / | | | | | | | Case No: | | |
| Deb | tor | ·s | | | | | | Chapter: | Chapter 13 | |
| | | | | DISC | LOSURE OF CO | MPENSATION O | DE ATTORNEY | FOR DEF | RTOR | |
| | npe | nsation p | aid to me | C. § 329(a) and Fe within one year b | ed. Bankr. P. 2016(lefore the filing of the debtor(s) in conter | b), I certify that I as the petition in bank | am the attorney f kruptcy, or agree | or the aboved to be paid | re named debtor(s d to me, for servi | ces |
| | F | or legal s | services, I | have agreed to ac | ecept | \$4,000.00 | | | | |
| | P | rior to th | e filing of | this statement I h | nave received | \$0.00 | | | | |
| | В | Balance D | ue | | | \$4,000.00 | | | | |
| 2. | T | he source | of the co | mpensation paid t | to me was: | | | | | |
| | | Deb | tor(s) | Other: (s | specify | | | | | |
| 3. | T | he source | e of compe | ensation to be paid | d to me is: | | | | | |
| | | Del | otor(s) | Other: (s | enecify | | | | | |
| 4. | | I have | () | ed to share the abo | ove-disclosed comp | pensation with any | other person un | less they ar | e members and a | ssociates |
| | | | law firm. | | disclosed compens greement, together | | | | | |
| 5. | | return fo | | ve-disclosed fee, I | have agreed to rer | nder legal service f | for all aspects of | the bankru | ptcy | |
| | a. | _ | vsis of the uptcy; | debtor' s financial | l situation, and reno | dering advice to th | e debtor in deter | mining wh | ether to file a pet | ition in |
| | b. | Prepa | ration and | filing of any peti- | tion, schedules, sta | tements of affairs | and plan which | may be requ | uired; | |
| | c. | Repre | sentation | of the debtor at th | ne meeting of credit | ors and confirmat | ion hearing, and | any adjour | ned hearings ther | reof; |
| | d. | Repre | sentation | of the debtor in ac | dversary proceedin | gs and other conte | sted bankruptcy | matters; | | |
| | e. | [Othe | r provisio | ns as needed] | | | | | | |
| 6. | В | v agreem | ent with th | ne debtor(s), the a | bove-disclosed fee | does not include t | the following ser | vice: | | |
| | • | | | () , | | | S | | | |
| | | | | | | | | | | |
| | | | T | 4:C. 41. 44 C | | CERTIFICATION | | £ £ | | |
| | | | payment | | soing is a complete | statement of any a | igieement or arra | ıngement fo |)I | |
| | | | me for re | epresentation of th | he debtor(s) in this | | - | | | |
| | | | | 09/16/2016 | | /s/ Lisa LaShawn | - | _ | | |
| | | | Date | | | Signature of Attor | rney | | | I |

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Geraci Law L.L.C. Name of law firm

UNITED STATES BANKRUPT OF COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



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- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



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- Case 16-29661 Doc 1 Filed 09/17/16 Entered 09/17/16 09:41:50 Desc Mail Document Page 52 of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.



C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows: purpose: provide some money for attorney without waiting 6 months. Advantage to debtor: costs client less by reducing administrative expense and encouraging efficiency rather than charging by hour and submitting bills.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;



- Case 16-29661 Doc 1 Filed 09/17/16 Entered 09/17/16 09:41:50 Desc Mair (d) Any portion of the retainer that is not earned of equived for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$ 4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00

| 3. Before signing this agreement, the attorney l | nas received, | ,\$0.0 | 00 | |
|--|---------------|----------|--------|--------------|
| toward the flat fee, leaving a balance due of \$ | 4000 00 | ; and \$ | 310.00 | for expenses |
| leaving a balance due for the filing fee of \$ | 0.00 | | | |



Case 16-29661 Doc 1 Filed 09/17/16 Entered 09/17/16 09:41:50 Desc Main 4. In extraordinary circumstances, such as extended extended by the fearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: $\frac{9/2}{100}$

Signed:

Debtor(s)

Co-Debtor(s)

Do not sign this agreement if the amounts are blank.

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National Headquarters: 55 E. Monroe Droet #3 @0 Chica @ alpe \$56 01-867-925-1313 help@geracilaw.com



Date: 9/2/2016

Consultation Attorney: LLH

Record #: 718-038

Attorney - Client Agreement

The undersigned hires Geraci Law L.L.C. and its associated attorneys for representation in a Chapter13 bankruptcy under the following terms and conditions. I have signed and received a copy the "Court Approved Retention Agreement" (CARA) between Chapter 13 Debtors and their Attorneys" as established by the Bankruptcy Court for the Northern District of Illinois, and any terms that conflict with it are null and void. I understand I must comply with those terms. Attorney fees for filed Chapter 13 Bankruptcy shall be the fee stated in the CARA I have received the 11U.S.C § 527(a) disclosures. I have been advised of my chapter 7 alternative and choose to file Chapter 13 instead even though it usually costs more. More than one attorney and paralegal will work on my case.

This does NOT INCLUDE court filing fees of \$310, costs for credit counseling or financial management classes. Any amount not paid prior to the case being filed shall be paid through the Chapter 13 Trustee. These fees are fixed, but the attorneys may apply to the court for additional fees if allowed by the CARA or other circumstances, such as extended evidentiary hearings, contested adversary proceedings or appeals. If the Court awards additional fees, they will also be paid through the Chapter 13 Trustee. Fees are "flat fees" and "advance payment retainers" for pre-filing and pre-confirmation work, become property of this firm on payment, and are deposited into the firm's operating account. Payments are applied to the "flat fee". If this contract is terminated by either party prior to the filing of the case, we will submit any dispute to binding arbitration within 30 days. If I close my file or breach this contract I agree to pay for the work done to that time. I assign to my attorney all amounts tendered as filing fees or court costs and authorize my attorney to transfer said funds from his trust account to his operating account in payment of all outstanding fees owed by me if case is not filed.

No other work: Geraci Law is not representing me in state or other courts regarding creditors in my bankruptcy. Any state court action not stopped by the Automatic Stay of a filed bankrutpcy is my responsibility. Injury or other claims or property I must disclose any such claims or propery I now have or acquire after filing Chapter 13 to both the Chapter 13 trustee and to the court in a filed amendment and obtain authority to keep them or pay those claims to the Trustee.

months. The payment and length of the plan are based per month for PLAN: The plan payment is estimated to be on the information I have provided, including income, expenses, assets and debts. If these amounts are not accurate, my plan payment or duration may need to be increased. In addition, the Court, Chapter 13 Trustee or creditors could object to my proposed Chapter 13 payment, which may cause it to increase. I further understand that if my income or expenses change during my Chapter 13, my plan payment may have to change. I agree to read my petition and plan and study it before signing it so I know what is included, INCLUDING what I am listing perty is, what my assets are and if they are claimed as exempt, and to make full disclosure.

| as debts, what my property is, what my assets are and if they are claimed as exempt, and to make run disclosure. | |
|--|---|
| My plan payment DOES include the following, unless stated otherwise: mortgage arrears; association arrears; vehicles; tax debt; obligations that are post due (but not future) parking tickets (not traffic fines); debts pursuant to a divorce decree/marital settlement of other secured debts including furniture, electronics, etc.; all other unsecured debts; other: Other secured debts including furniture, electronics, etc.; all other unsecured debts; other: Other secured debts including furniture, electronics, etc.; all other unsecured debts; other: Other secured debts including furniture, electronics, etc.; all other unsecured debts; other: Other secured debts including furniture, electronics, etc.; all other unsecured debts; other: Other secured debts including furniture, electronics, etc.; all other unsecured debts; other: Other secured debts including furniture, electronics, etc.; all other unsecured debts; other: Other secured debts including furniture, electronics, etc.; all other unsecured debts; other: Other secured debts included future mortgage, rent, condo fees and support payments; criminal fines/court fees; rearrears; student loan principal and interest unless 100% planned to unsecured creditors, sold property taxes; debts incurred after the arreary filed, including any association fees as long as the property is in my name; other Student loans: are usually NEVER paid 100% in a Chapter 13, but are paid the same percentage as unsecured creditors without in my student loans will CONTINUE to accrue interest, and if I don't pay them directly they will be even larger at the end of the plan, so been told about this and I will deal with my student loans; educational debts; unfiled or late filed tax debts; undisclosed debts; been told about this and I will deal with my student loans; educational debts; unfiled or late filed tax debts; undisclosed debts; support/maintenance debts; debts incurred by fraud, or debts listed in your red folder or found non-dischargeable by a Judge. Support/maintenance debts | ent/lease ne case is nterest, so so I have entters. ess I am also e proceeds, |
| I cannot transfer any property or incur any credit or debt without the express permission of my attorney or the Court and I must ma disclosure of all income, expenses, debts and assets in my initial consultation and on my bankruptcy petition. If I fail to remain cur domestic support obligation, fail to certify to the Court that I have remained current, or if I fail to take my financial management clacase may be closed without a discharge and I will be required to pay a fee to have it reopened. | ke full rent in a ss, that my |

épresenting Geraci Law L.L.C.

Deboráh Broadney (Joint Debtor)

Page 1 of 1

Broadney (Debtőr)

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

Keith Carter Broadney and Deborah Ann Broadney / Debtors

In re

Bankruptcy Docket #:

Judge:

| VERIFICATION | ∩ E | CDEDITOD | MATDIV |
|--------------|------------|----------|--------|
| VERIFICATION | OF. | CKEDITOR | |

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 09/16/2016 /s/ Keith Carter Broadney

Keith Carter Broadney

X Date & Sign

Dated: 09/16/2016 /s/ Deborah Ann Broadney

Deborah Ann Broadney

X Date & Sign

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

Document Page 58 of 67 In re Keith Carter Broadney and Deboral Ann Broadney / Debtors

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

Record # 718038 B 201A (Form 201A) (11/11) Page 1 of 2

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Form B 201A, Notice to Consumer Debtor(s)

In re Keith Carter Broadney and Deboran Ann Broadney / Debt

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 09/16/2016 | /s/ Keith Carter Broadney |
|-------------------|------------------------------|
| | Keith Carter Broadney |
| Dated: 09/16/2016 | /s/ Deborah Ann Broadney |
| | Deborah Ann Broadney |
| Dated: 09/16/2016 | /s/ Lisa LaShawn Haley |
| | Attorney: Lisa LaShawn Haley |

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Document Page 60 of 67 Keith Debtor 1 Carter Broadney Case Number (if known) Last Name **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) What kind of debts do as "incurred by an individual primarily for a personal, family, or household purpose." you have? ∐No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is excluded and ∏No. administrative expenses Yes. are paid that funds will be available for distribution to unsecured creditors? How many creditors do 1-49 1,000-5,000 25,001-50,000 you estimate that you 50-99 **5,001-10,000** 50,001-100,000 owe? 100-199 **1**0,001-25,000 ☐ More than 100,000 200-999 How much do you \$0-\$50,000 \$1,000,001-\$10 million □\$500,000,001-\$1 billion estimate your assets to \$50,001-\$100,000 \$10,000,001-\$50 million □\$1,000,000,001-\$10 billion be worth? 100,001-\$500,000 ☐ \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million ☐ \$100,000,001-\$500 million More than \$50 billion 20. How much do you \$0-\$50,000 \$1,000,001-\$10 million □\$500,000,001-\$1 billion estimate your liabilities \$50,001-\$100,000 ☐ \$10,000,001-\$50 million □\$1,000,000,001-\$10 billion to be? **\$100,001-\$500,000** \$50,000,001-\$100 million □\$10,000,000,001-\$50 billion ☐ \$500,001-\$1 million \$100,000,001-\$500 million ☐ More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11. United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Official Form 101

Record # 718038

Voluntary Petition for Individuals Filing for Bankruptcy

page 6

Executed on 09

MM / DD / YYYY

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| btor 1 | Keith | Carter | Broadney- | |
|---------------------|----------------------------|----------------------|---------------------|--|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Deborah | Ann | Broadney | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| nited States E | Bankruptcy Court for the : | NORTHERN District of | of ILLINGIS (State) | |
| (If known) | | | | |

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|---|---|
| | |
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out | bankruptcy forms? |
| No No | |
| D vol Name of Domesti | |
| Yes. Name of Person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
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| Under penalty of perjury, I declare that I have read the summary and schedules fi | Fland with the destruction of the state |
| correct. | ned with this declaration and that they are true and |
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| Signature of Debtor 1 | peter 2 Shoodney |
| | . (|
| Date 9 / 16/2016 Date 9 | _/_ <i> /</i> 2016 |
| MM / DD / YYYY | DD / YYYY |
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| Dentor 1 | First Name | Middle Name | Broadney | Case Number (if kno | own) | |
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| | | | | | | |
| Did you | attach additional pag | es to Your Statement of Fil | nancial Affairs for Individuals | Filing for Bankruptcy (Official Fo | orm 107)? | |
| | | | | and the property (Calculate) | om tory: | |
| No. | | | | | | |
| Yes | | | | | | |
| . | | | | • | | |
| אסה מור | pay or agree to pay s | omeone who is not an attor | rney to help you fill out bankru | ptcy forms? | | |
| No | | | | | | |
| | _ | | | | | |
| ∐ Yes. | Name of person | | | Attach the Bankruptcy Petition P | reparer's Notice. | |
| | | | | Declaration, and Sig | gnature (Official Form 119). | |
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Case 16-29661 Doc 1 Filed 09/17/16 Entered 09/17/16 09:41:50 Desc Mair DISCLAIMER CORRESTS FAGE 63 of and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entityin connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for fimily support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors, a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filling fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filling, and make sure you keep buildings & killed in there you may be liable.
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- .46. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankruptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is formed.

| A I I I I I I I I I I I I I I I I I I I | ight object if I/we have excess income, or change in State, Federal or | r Bankruptcy laws before the case |
|---|--|-----------------------------------|
| Dated: 7 / 6 /2016 | ere bu | X Date & Sign |
| | Keith Carter Broadney | |
| Dated: 4 /2016 | Speak & Bronday | X Date & Sign |
| | Deborah Ann Broadney | |

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Keith Carter Broadney and Deborah Ann Broadney / Debtors

Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

Dated: 9 1/6 /2016

Dated: 9 1/6 /2016

X Date & Sign

Dated: 9 1/6 /2016

X Date & Sign

Dated: 9 1/6 /2016

X Date & Sign

Deborah Ann Broadney

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

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Part 4:

Sign Below

By signing here, I declare under penalty of perjury th

analty of perjury that the information on this statement and in any attachments is true and correct.

Keith Carter Broadney

Deborah Ann Broadney

Date: 9 1/6 /2016

Date: 4 /14 /2016

If you checked line 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Debtor 1 Keith Carter Broadney First Name Middle Name Lact Name By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Keith Carter Broadney Date: Dated: 216/2016 Page 66 of 67 Case Number (if known) Case Number (if known) Date Name Date: Dated: 216/2016

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Form B 201A, Notice to Consumer Debtor(s)

In re Keith Carter Broadney and Deborah Ann Broadney / Debtors

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptev Crimes and Availability of Bankruptev Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 9 1/6 12016 | Leedburg | X Date & Sign |
|---------------------|------------------------------|---------------|
| | Keith Carter Broadney | |
| Dated: 9 /14 /2016 | De John a Gradner | X Date & Sign |
| 0 1/ | Deborah Knn Broadney | |
| Dated: 4 / 16 /2016 | NION COM | |
| | Attorney. Lisa LaShawa Haley | |

Record # 718038